

TITLE V BLOCK GRANT APPLICATION
FORMS (1-21)
STATE: NJ
APPLICATION YEAR: 2006

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APPLICATION FOR FEDERAL ASSISTANCE		2. DATE SUBMITTED 7/15/2005	APPLICANT IDENTIFIER
1. TYPE OF SUBMISSION:		3. DATE RECEIVED BY STATE	STATE APPLICATION IDENTIFIER
Application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	Pre-application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	4. DATE RECEIVED BY FEDERAL AGENCY	FEDERAL IDENTIFIER
5. APPLICANT INFORMATION			
Legal Name: NJ Department of Health & Senior Services		Organizational Unit: Family Health Services	
Address (give city, county, state and zip code) P.O. Box 364 Trenton, NJ 08625 County:		Name and telephone number of the person to be contacted on matters involving this application (give area code) Name: Celeste Andriot Wood Tel Number: 609.292.4043	
6. EMPLOYER IDENTIFICATION NUMBER (EIN): <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 10px;">21</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">-600092</div>		7. TYPE OF APPLICANT: (Enter appropriate letter in box) A A. State H. Independent School District B. County I. State Controlled Institution of Higher Learning C. Municipality J. Private University D. Township K. Indian Tribe E. Interstate L. Individual F. Intermunicipality M. Profit Organization G. Special District N. Other (Specify)	
8. TYPE OF APPLICATION: <input type="checkbox"/> New <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es) <input type="checkbox"/> <input type="checkbox"/> A. Increase Award B. Decrease Award C. Increase Duration Decrease Duration Other (specify):		9 NAME OF FEDERAL AGENCY: Health Resources and Services Administration, Maternal and Child Health Bureau	
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 10px;">93</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">994</div> TITLE: Maternal and Child Health Services Block Grant		11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: Improve the health of mothers, infants & children	
12. AREAS AFFECTED BY PROJECT (cities, communities, states, etc.): State on New Jersey			
13. PROPOSED PROJECT:		14. CONGRESSIONAL DISTRICTS OF:	
Start Date: 10/01/2005	Ending Date: 09/30/2006	a. Applicant	b. Project
15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?	
a. Federal	\$ <u>12,348,500.00</u>	a. YES, THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON DATE: b. NO <input checked="" type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW	
b. Applicant	\$ <u>0.00</u>		
c. State	\$ <u>90,237,699.00</u>		
d. Local	\$ <u>0.00</u>		
e. Other	\$ <u>0.00</u>		
f. Program Income	\$ <u>0.00</u>		
g. TOTAL	\$ <u>102,586,199.00</u>	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT <input type="checkbox"/> Yes. If "Yes", attach an explanation <input checked="" type="checkbox"/> No	
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY BY THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.			
a. Typed Name of Authorized Representative Eddy A. Bresnitz, M.D., M.S.		b. Title Deputy Commissioner	c. Telephone Number 609.292.7836
d. Signature of Authorized Representative		e. Date Signed	

FORM 2
MCH BUDGET DETAILS FOR FY 2006

[Secs. 504 (d) and 505(a)(3)(4)]

STATE: NJ

1. FEDERAL ALLOCATION

(Item 15a of the Application Face Sheet [SF 424])
Of the Federal Allocation (1 above), the amount earmarked for:

\$ 12,348,500

A.Preventive and primary care for children:

\$ 5,825,629 (47.18%)

B.Children with special health care needs:

\$ 4,247,940 (34.4%)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V administrative costs:

\$ 1,100,000 (8.91%)

(The above figure cannot be more than 10%)[Sec. 504(d)]

2. UNOBLIGATED BALANCE (Item 15b of SF 424)

\$ 0

3. STATE MCH FUNDS (Item 15c of the SF 424)

\$ 90,237,699

4. LOCAL MCH FUNDS (Item 15d of SF 424)

\$ 0

5. OTHER FUNDS (Item 15e of SF 424)

\$ 0

6. PROGRAM INCOME (Item 15f of SF 424)

\$ 0

7. TOTAL STATE MATCH (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$ 9,419,570

\$ 90,237,699

8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 102,586,199

9. OTHER FEDERAL FUNDS

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 0

b. SSDI: \$ 100,000

c. CISS: \$ 0

d. Abstinence Education: \$ 914,945

e. Healthy Start: \$ 500,000

f. EMSC: \$ 0

g. WIC: \$ 22,088,115

h. AIDS: \$ 2,283,000

i. CDC: \$ 1,442,466

j. Education: \$ 10,193,673

k. Other: \$

Family Planning \$ 3,121,766

Other \$ 971,013

SSBG \$ 1,922,000

10. OTHER FEDERAL FUNDS (SUBTOTAL of all Funds under item 9)

\$ 43,536,978

11. STATE MCH BUDGET TOTAL

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 146,123,177

FORM NOTES FOR FORM 2

None

FIELD LEVEL NOTES

1.

Section Number:

Main

Field Name:

WIC

Row Name:

Other Federal Funds - WIC

Column Name:

Year:

2006

Field Note:

Aministration only.
2.

Section Number:

Main

Field Name:

OtherFedFundsOtherFund

Row Name:

Other Federal Funds - Other Funds

Column Name:

Year:

2006

Field Note:

SSBG - Social Service Block Grant

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506(a)(1-3)]

STATE: NJ

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 12,102,033	\$ 13,692,920	\$ 12,348,050	\$ 0	\$ 12,348,500	\$ 0
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
3. State Funds <i>(Line3, Form 2)</i>	\$ 17,388,000	\$ 17,089,966	\$ 22,292,699	\$ 0	\$ 90,237,699	\$ 0
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
6. Program Income <i>(Line6, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
7. Subtotal <i>(Line8, Form 2)</i>	\$ 29,490,033	\$ 30,782,886	\$ 34,640,749	\$ 0	\$ 102,586,199	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 45,938,502	\$ 45,205,450	\$ 44,750,927	\$ 0	\$ 43,536,978	\$ 0
9. Total <i>(Line11, Form 2)</i>	\$ 75,428,535	\$ 75,988,336	\$ 79,391,676	\$ 0	\$ 146,123,177	\$ 0
(STATE MCH BUDGET TOTAL)						

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506(a)(1-3)]

STATE: NJ

	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation (Line1, Form 2)	\$ 11,806,608	\$ 16,715,926	\$ 11,904,654	\$ 12,314,548	\$ 12,132,446	\$ 11,887,968
2. Unobligated Balance (Line2, Form 2)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
3. State Funds (Line3, Form 2)	\$ 11,526,285	\$ 12,798,231	\$ 15,613,085	\$ 15,569,343	\$ 17,408,031	\$ 16,780,208
4. Local MCH Funds (Line4, Form 2)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds (Line5, Form 2)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
6. Program Income (Line6, Form 2)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
7. Subtotal (Line8, Form 2)	\$ 23,332,893	\$ 29,514,157	\$ 27,517,739	\$ 27,883,891	\$ 29,540,477	\$ 28,668,176
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds (Line10, Form 2)	\$ 12,151,237	\$ 11,950,230	\$ 11,857,892	\$ 11,492,992	\$ 22,856,633	\$ 22,429,860
9. Total (Line11, Form 2)	\$ 35,484,130	\$ 41,464,387	\$ 39,375,631	\$ 39,376,883	\$ 52,397,110	\$ 51,098,036
(STATE MCH BUDGET TOTAL)						

FORM NOTES FOR FORM 3

Expended FY2004 Federal Allocations exceeded Budgeted Federal Allocations due to expenditure of carry forward funding.

Previous years state appropriation for early intervention direct services not included.

FIELD LEVEL NOTES

1.

Section Number: Main

Field Name: FedAllocExpended

Row Name: Federal Allocation

Column Name: Expended

Year: 2004

Field Note:

FY2004 Federal Allocation Expended exceeds Budgeted Federal Allocation by 13%.

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: NJ

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 4,452,995	\$ 4,617,433	\$ 4,930,303	\$ 0	\$ 7,430,303	\$ 0
b. Infants < 1 year old	\$ 5,376,286	\$ 5,540,919	\$ 7,636,945	\$ 0	\$ 10,842,945	\$ 0
c. Children 1 to 22 years old	\$ 8,611,089	\$ 8,619,208	\$ 9,891,684	\$ 0	\$ 11,545,240	\$ 0
d. Children with Special Healthcare Needs	\$ 9,908,651	\$ 10,824,253	\$ 11,081,817	\$ 0	\$ 71,667,711	\$ 0
e. Others	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
f. Administration	\$ 1,141,012	\$ 1,181,073	\$ 1,100,000	\$ 0	\$ 1,100,000	\$ 0
g. SUBTOTAL	\$ 29,490,033	\$ 30,782,886	\$ 34,640,749	\$ 0	\$ 102,586,199	\$ 0
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 94,000		\$ 100,000		\$ 100,000	
c. CISS	\$ 0		\$ 0		\$ 0	
d. Abstinence Education	\$ 843,071		\$ 843,000		\$ 914,945	
e. Healthy Start	\$ 500,000		\$ 500,000		\$ 500,000	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 22,774,743		\$ 20,721,000		\$ 22,088,115	
h. AIDS	\$ 2,232,878		\$ 2,072,878		\$ 2,283,000	
i. CDC	\$ 2,321,995		\$ 2,322,546		\$ 1,442,466	
j. Education	\$ 11,876,000		\$ 11,876,000		\$ 10,193,673	
k. Other						
Family Planning	\$ 3,103,266		\$ 3,121,766		\$ 3,121,766	
Other	\$ 0		\$ 0		\$ 971,013	
SSBG	\$ 0		\$ 0		\$ 1,922,000	
All Other	\$ 0		\$ 3,193,737		\$ 0	
other total	\$ 2,192,549		\$ 0		\$ 0	
III. SUBTOTAL	\$ 45,938,502		\$ 44,750,927		\$ 43,536,978	

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: NJ

	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 3,809,840	\$ 4,875,025	\$ 3,836,920	\$ 3,847,977	\$ 4,489,097	\$ 3,970,205
b. Infants < 1 year old	\$ 2,205,725	\$ 3,391,439	\$ 5,295,271	\$ 5,381,591	\$ 5,370,911	\$ 5,174,267
c. Children 1 to 22 years old	\$ 7,298,865	\$ 9,104,360	\$ 7,606,000	\$ 7,779,605	\$ 8,571,684	\$ 8,487,134
d. Children with Special Healthcare Needs	\$ 9,046,691	\$ 10,888,447	\$ 9,638,483	\$ 9,759,362	\$ 9,992,600	\$ 9,947,180
e. Others	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
f. Administration	\$ 971,772	\$ 1,254,886	\$ 1,141,065	\$ 1,115,356	\$ 1,116,185	\$ 1,089,390
g. SUBTOTAL	\$ 23,332,893	\$ 29,514,157	\$ 27,517,739	\$ 27,883,891	\$ 29,540,477	\$ 28,668,176
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 100,000		\$ 100,000		\$ 132,836	
c. CISS	\$ 0		\$ 0		\$ 0	
d. Abstinence Education	\$ 843,071		\$ 843,071		\$ 843,000	
e. Healthy Start	\$ 344,500		\$ 0		\$ 500,000	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 2,535,977		\$ 2,364,550		\$ 2,072,878	
i. CDC	\$ 2,219,952		\$ 2,884,534		\$ 3,099,467	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
All Other	\$ 0		\$ 3,749,737		\$ 971,013	
Early Intervention	\$ 0		\$ 0		\$ 10,193,673	
Family Planning	\$ 0		\$ 0		\$ 3,121,766	
Social Security Block	\$ 0		\$ 0		\$ 1,922,000	
SSBG	\$ 1,916,000		\$ 1,916,000		\$ 0	
All other including PHHS BG	\$ 4,191,737		\$ 0		\$ 0	
III. SUBTOTAL	\$ 12,151,237		\$ 11,857,892		\$ 22,856,633	

FORM NOTES FOR FORM 4

None

FIELD LEVEL NOTES

1.

Section Number:

I. Federal-State MCH Block Grant Partnership

Field Name:

PregWomenExpended

Row Name:

Pregnant Women

Column Name:

Expended

Year:

2003

Field Note:

FY2003 Pregnant Women, Expended differs from budgeted amount by more than 10% (11.6%).
2.

Section Number:

I. Federal-State MCH Block Grant Partnership

Field Name:

PregWomenExpended

Row Name:

Pregnant Women

Column Name:

Expended

Year:

2004

Field Note:

Expended exceeds budgeted amount by more than 10% due to carry-over expenditures.

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: NJ

TYPE OF SERVICE	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 8,257,209	\$ 9,448,723	\$ 9,391,410	\$ 0	\$ 71,417,821	\$ 0
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 9,436,811	\$ 9,850,523	\$ 10,397,630	\$ 0	\$ 14,220,380	\$ 0
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 6,487,807	\$ 6,632,235	\$ 8,385,190	\$ 0	\$ 11,408,940	\$ 0
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 5,308,206	\$ 4,851,405	\$ 6,466,519	\$ 0	\$ 5,539,058	\$ 0
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 29,490,033	\$ 30,782,886	\$ 34,640,749	\$ 0	\$ 102,586,199	\$ 0

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: NJ

TYPE OF SERVICE	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 7,279,575	\$ 8,400,230	\$ 6,692,000	\$ 6,970,973	\$ 8,075,500	\$ 7,740,410
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 7,287,626	\$ 8,994,690	\$ 9,708,339	\$ 10,038,201	\$ 9,746,985	\$ 9,747,180
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 3,209,221	\$ 5,845,308	\$ 5,972,500	\$ 6,134,456	\$ 6,250,000	\$ 6,020,320
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 5,556,471	\$ 6,273,929	\$ 5,144,900	\$ 4,740,261	\$ 5,467,992	\$ 5,160,266
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 23,332,893	\$ 29,514,157	\$ 27,517,739	\$ 27,883,891	\$ 29,540,477	\$ 28,668,176

FORM NOTES FOR FORM 5

Previous years (before 2006) state appropriation for early intervention direct services not included.

FIELD LEVEL NOTES

1.

Section Number: Main

Field Name: DirectHCBudgeted

Row Name: Direct Health Care Services

Column Name: Budgeted

Year: 2006

Field Note:

Previous years (before 2006) state appropriation for early intervention direct services not included.

2.

Section Number: Main

Field Name: DirectHCExpended

Row Name: Direct Health Care Services

Column Name: Expended

Year: 2004

Field Note:

Previous years (before 2006) state appropriation for early intervention direct services not included.

FORM 6

NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED

Sect. 506(a)(2)(B)(iii)

STATE: NJ

Total Births by Occurrence: 112,051

Reporting Year: 2004

Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment(3)	
	No.	%			No.	%
Phenylketonuria	111,583	99.6	13	6	6	100
Congenital Hypothyroidism	111,583	99.6	86	58	58	100
Galactosemia	111,583	99.6	112	4	4	100
Sickle Cell Disease	111,583	99.6	92	54	54	100
Other Screening (Specify)						
Biotinidase Deficiency	111,583	99.6	10	10	10	100
Cystic Fibrosis	111,583	99.6	75	20	20	100
Congenital Adrenal Hyperplasia (CAH)	111,583	99.6	118	9	9	100
Maple Syrup Urine Disease (MSUD)	111,583	99.6	1	1	1	100
Medium Chain AcylCo-A Dehydrogenase (MCAD)	111,583	99.6	15	5	5	100
SCAD - short chain acyl-CoA dehydrogenase	111,583	99.6	15	3	3	100
LCAD - long chain acyl-CoA dehydrogenase	111,583	99.6	15	0	0	
Urea Cycle defects - Arginosuccinic acidemia & Citrullinemia	111,583	99.6	0	0	0	
VLCAD - very long chain acyl-CoA dehydrogenase	111,583	99.6	15	0	0	
Organic acidemias - methymalonic & propionic acidemia	111,583	99.6	26	1	1	100

Screening Programs for Older Children & Women (Specify Tests by name)

Pediatric Lead Screening						
--------------------------	--	--	--	--	--	--

- (1) Use occurrent births as denominator.
 (2) Report only those from resident births.
 (3) Use number of confirmed cases as denominator.

FORM NOTES FOR FORM 6

None

FIELD LEVEL NOTES

1. **Section Number:** Screening Programs for Older Children and Women

Field Name: OtherWomen

Row Name: All Rows

Column Name: All Columns

Year: 2006

Field Note:

Children (0-16) screening for lead poisoning. Of these, 92,645 were between six months and 29 months of age, the ages at which state rules require all children to be screened for lead poisoning. This is 41.6% of all children in that age group.

Column B - Children (0-16 y.o.) with elevated blood lead levels (≥ 20 ug/dL) reported to the New Jersey Childhood Lead Poisoning Prevention Surveillance System (CLPPSS) for 7/1/2003 - 6/30/2004.

FORM 7
NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V
(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)

[Sec. 506(a)(2)(A)(i-ii)]

STATE: NJ

Reporting Year: 2004

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	109,552	24.8		67.0	3.0	
Infants < 1 year old	112,117	22.0		67.0	4.9	
Children 1 to 22 years old	120,464					
Children with Special Healthcare Needs	48,800	40.0		54.0	3.0	3.0
Others	211,265					
TOTAL	602,198					

FORM NOTES FOR FORM 7

The number of women delivering a live birth in New Jersey during 2004 from the Electronic Birth Certificate (EBC) file (as of 6/23/2005) is used to estimate the total number of pregnant women served.

Primary source of Insurance coverage for prenatal care is self-reported from the NJ PRAMS 2002 and 2003.

The number of infants < 1 years old served is estimated from the number of infants born in 2004 from the EBC file (as of 6/23/2005).

Primary source of health insurance coverage for infants < 1 years old is estimated from the self-reported insurance coverage at time of delivery from the NJ PRAMS 2002 and 2003.

FIELD LEVEL NOTES

1. Section Number: Main

Field Name: PregWomen_TS

Row Name: Pregnant Women

Column Name: Title V Total Served

Year: 2006

Field Note:

The number of women delivering a live birth in New Jersey during 2004 from the Electronic Birth Certificate (EBC) file is used to estimate the total number of pregnant women served.

Primary source of Insurance coverage for prenatal care is self-reported from the NJ PRAMS 2003.

2. Section Number: Main

Field Name: Children_0_1_TS

Row Name: Infants <1 year of age

Column Name: Title V Total Served

Year: 2006

Field Note:

The number of live births during 2004 in New Jersey from the Electronic Birth Certificate (EBC) file is used to report the total number of infants < 1 year old served.

Insurance status of the mother at time of delivery is self-reported on the EBC.

3. Section Number: Main

Field Name: Children_1_22_TS

Row Name: Children 1 to 22 years of age

Column Name: Title V Total Served

Year: 2006

Field Note:

Estimated number of Children 1 to 22 years old is based on the total of children served in 2004 in the Fluoride Mouthrinse Program (46,700), Oral Health Education (51,000), POrSCHe Program (764), and Adolescent Community Partnerships (22,000). Primary source of health insurance coverage is not available. An exact unduplicated count of children served is not available from the programmatic data.

4. Section Number: Main

Field Name: CSHCN_TS

Row Name: Children with Special Health Care Needs

Column Name: Title V Total Served

Year: 2006

Field Note:

Children served by Case Management, Child Evaluation Centers, Tertiary Care Centers, Cleft Lip/Cleft Palate Centers & Newborn Biochemical Follow-up.

Primary sources of Insurance based on programmatic statistics reported to SCHEIS from grantee programs.

5. Section Number: Main

Field Name: AllOthers_TS

Row Name: Others

Column Name: Title V Total Served

Year: 2006

Field Note:

Number of Others is an estimate of individuals served in Family Planning Centers (30,000). Includes children (0-16) reported screened for lead poisoning to the NJ Childhood Lead Poisoning Prevention Surveillance System (181,265 during State FY 2004).

FORM 8
DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE
XIX
(BY RACE AND ETHNICITY)
[SEC. 506(A)(2)(C-D)]
STATE: NJ

Reporting Year: 2003

I. UNDUPLICATED COUNT BY RACE

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
DELIVERIES								
Total Deliveries in State	114,185	83,300	19,200	286	9,890	29		1,480
Title V Served	114,185	83,300	19,200	286	9,890	29		1,480
Eligible for Title XIX	22,084	11,810	8,395	50	627	170		1,032
INFANTS								
Total Infants in State	116,813	85,375	19,566	289	10,048	30		1,505
Title V Served	116,813	85,375	19,566	289	10,048	30		1,505
Eligible for Title XIX	22,084	11,810	8,395	50	627	170		1,032

II. UNDUPLICATED COUNT BY ETHNICITY

				HISPANIC OR LATINO (Sub-categories by country or area of origin)				
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
DELIVERIES								
Total Deliveries in State	85,176	25,784		5,225	706	6,534	13,144	175
Title V Served	85,176	25,784		5,225	706	6,534	13,144	175
Eligible for Title XIX	14,126	7,839	220	848	144	3,075	3,644	128
INFANTS								
Total Infants in State	87,338	26,121		5,266	719	6,641	13,311	184
Title V Served	87,338	26,121		5,266	719	6,641	13,311	184
Eligible for Title XIX	14,126	7,839	220	848	144	3,075	3,644	128

FORM NOTES FOR FORM 8

Source of data for Form 8 is the final 2003 (geocoded) Birth Certificate File. Column F includes Native Hawaiians. Column E includes Other Asians or Pacific Islanders. Eligible for XIX data is estimated from a file matching 2001 EBC data to 2001 Medicaid enrolled births.

FIELD LEVEL NOTES

None

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: NJ

	FY 2006	FY 2005	FY 2004	FY 2003	FY 2002
1. State MCH Toll-Free "Hotline" Telephone Number	(800) 328-3838	(800) 328-3838	(800) 328-3838	(800) 328-3838	(800) 328-3838
2. State MCH Toll-Free "Hotline" Name	Family Health Line	Family Health Line	Family Health Line	Family Health Line	Family Health Line
3. Name of Contact Person for State MCH "Hotline"	Reza Behbehanian	Reza Behbehanian	Reza Behbehanian	Reza Behbehanian	Reza Behbehanian
4. Contact Person's Telephone Number	(609) 292-5616	(609) 292-5616	(609) 292-5616	(609) 292-5616	(609) 292-5616
5. Number of calls received on the State MCH "Hotline" this reporting period	0		12,020	10,986	9,923

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: NJ

	FY 2006	FY 2005	FY 2004	FY 2003	FY 2002
1. State MCH Toll-Free "Hotline" Telephone Number					
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"					
4. Contact Person's Telephone Number					
5. Number of calls received on the State MCH "Hotline" this reporting period	0	0	0	0	0

FORM NOTES FOR FORM 9
None
FIELD LEVEL NOTES
None

FORM 10
TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT
STATE PROFILE FOR FY 2006
[SEC. 506(A)(1)]
STATE: NJ

1. State MCH Administration:
(max 2500 characters)

In New Jersey the administration of the MCH Block Grant, including the program for children with special health care needs, is organizationally located within the Department of Health and Senior Services, Division of Family Health Services (FHS). The division's organization is based on function, rather than categorical programs. Maternal, Child and Community Health (MCCH) has oversight of the Maternal and Child Health Consortia (MCHC), the Healthy Mothers Healthy Babies Coalitions (HMHB), FAS risk reduction perinatal addiction services, Healthy Start, the Black Infant Mortality Reduction Awareness Campaign, comprehensive maternity services and outreach and education, preventive and primary care services including child and adolescent health services, oral health, childhood lead poisoning prevention services, Title X-family planning, breast and cervical cancer control initiative, the primary care cooperative agreement, and the federally qualified health center (FQHC) expansion program. The second service unit in FHS, Special Child Health and Early Intervention Services (SCHEIS) administers programs and services to assure that all persons with special health needs have access to comprehensive, community based, culturally competent and family centered care. The Birth Defects registry provides for early identification and surveillance. Newborn screening follow-up is within SCAEIS. Specialized pediatric evaluation and treatment services are managed by SCAEIS along with community based case management services for children with special health care needs. Services for adults include hereditary disorders, diabetes control, Huntington's disease, and chronic renal disease. The MCH Epidemiology Program is under the Office of the Medical Director within the Office of the Assistant Commissioner.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ 12,348,500
3. Unobligated balance (Line 2, Form 2)	\$ 0
4. State Funds (Line 3, Form 2)	\$ 90,237,699
5. Local MCH Funds (Line 4, Form 2)	\$ 0
6. Other Funds (Line 5, Form 2)	\$ 0
7. Program Income (Line 6, Form 2)	\$ 0
8. Total Federal-State Partnership (Line 8, Form 2)	\$ 102,586,199

9. Most significant providers receiving MCH funds:

MCH Consortia

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	109,552
b. Infants < 1 year old	112,117
c. Children 1 to 22 years old	120,464
d. CSHCN	48,800
e. Others	211,265

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:
(max 2500 characters)

The prevention oriented system for child health is an outreach case management model designed to assist primary health care providers deliver more effective health supervision and medical care to high risk families through supportive nurse home visiting services. Confidential family planning services are available throughout the state to adolescents. Through home visiting projects, pregnant/parenting adolescents and their infants receive parenting skills training, and linkage with preventive and primary health care. Outreach and education to promote healthy birth outcomes are provided through a network of Healthy Mothers Healthy Babies coalitions. Safety net pediatric tertiary medical and developmental services are available to children with special health care needs. The County Case Management Units provide individualized case management/care coordination services for families with children with special health care need.

b. Population-Based Services:
(max 2500 characters)

Newborn screening follow up assures infants identified as having an inborn error of metabolism receive timely and appropriate treatment. Through the Cavity Free Kids program and the school fluoride mouth rinse program preschool and school age children participate in oral health education activities. The SIDS Center of New Jersey provides the following services: 1) a 24-hour hotline for the acceptance of SIDS case referrals and the provision of information about SIDS, 2) grief counseling services for parents affected by SIDS, 3) a system of continuing public an professional education, and 4) the development of local support groups.

c. Infrastructure Building Services:
(max 2500 characters)

The state's six regional Maternal and Child Health Consortia serve as the local planning, quality assurance, and professional and consumer education agents focused on MCH issues. Using the electronic birth certificate information along with other relevant data, MCH epidemiology collects and analyzes data on maternal and child health indicators to assist in needs assessment, program planning and improving health outcomes. The birth defects monitoring program maintains the SCAHS registry which includes the confidential registration of infants/children with birth defects and special health care needs. This registry serves as an entry point into the SCHEIS case management system. Community Partnerships for Healthy Adolescents provide a focal point for coordinating health promotion activities for Adolescents in eight communities.

12. The primary Title V Program contact person:

Name Celeste Andriot Wood

13. The children with special health care needs (CSHCN) contact person:

Name Gloria Rodriguez

Title Assistant Commissioner
Address PO Box 364
City Trenton
State NJ
Zip 08625-0364
Phone (609) 292-4043
Fax (609) 292-9599
Email Celeste.Andriot-Wood@doh.state.nj.us
Web

Title Service Director of Special Child Health & Early Interve
Address PO Box 364
City Trenton
State NJ
Zip 08625-0364
Phone (609) 292-9599
Fax (609) 292-9599
Email Celeste.Andriot-Wood@doh.state.nj.us
Web

FORM NOTES FOR FORM 10

None

FIELD LEVEL NOTES

None

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]
STATE: NJ

PERFORMANCE MEASURE # 01

The percent of newborns who are screened and confirmed with condition(s) mandated by their State-sponsored newborn screening programs (e.g. phenylketonuria and hemoglobinopathies) who receive appropriate follow up as defined by their State.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		100	100	100	100
Annual Indicator		100.0	100.0	100.0	99.6
Numerator		112,886	111,950	113,215	111,583
Denominator		112,886	111,950	113,215	112,051
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 02

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective			57	58	59
Annual Indicator			57.7	57.7	57.7
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	60	61	62	62	63
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 03

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

Annual Objective and Performance Data					
	2000	2001	2002	2003	2004
Annual Performance Objective			52	53	54
Annual Indicator			52	52	52
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	55	56	57	57	58
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 04

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

Annual Objective and Performance Data					
	2000	2001	2002	2003	2004
Annual Performance Objective			62	62	63
Annual Indicator			62.1	62.1	62.1
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	63	64	64	65	65
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 05

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective			75	76	77
Annual Indicator			75.9	75.9	75.9
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	78	79	80	80	81
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 06

The percentage of youth with special health care needs who received the services necessary to make transition to all aspects of adult life. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective			5	6	7
Annual Indicator			5.8	5.8	5.8
Numerator					
Denominator					
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	8	10	12	14	16
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 07

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	71	73	74	75	76
Annual Indicator	71.2	73.1	76.1	75	78.8
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	79	79	80	80	81
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 08

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	18	17.5	17	16.5	16
Annual Indicator	15.9	16.9	16.1	15.4	12.5
Numerator	2,539	2,557	2,478	2,424	2,216
Denominator	159,548	150,917	154,388	157,765	176,780
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	12.5	12.4	12.3	12.2	12
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 09

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	42	42	42	43	43
Annual Indicator	42.0	NaN	NaN	42.6	42
Numerator	940	0	0	803	
Denominator	2,237	0	0	1,883	
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	44	44	45	45	46
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 10

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	2.2	2.1	2	1.9	1.7
Annual Indicator	1.4	2.0	1.6	2.0	
Numerator	25	34	28	34	
Denominator	1,734,603	1,739,257	1,775,525	1,738,140	
Is the Data Provisional or Final?				Provisional	

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	1.6	1.6	1.5	1.5	1.4
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 11

Percentage of mothers who breastfeed their infants at hospital discharge.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	63	64	66	67	68
Annual Indicator	63.2	63.9	66.0	67.3	67.8
Numerator		69,738	72,240	73,758	74,463
Denominator		109,166	109,520	109,596	109,876
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	69	69	70	70	71
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 12

Percentage of newborns who have been screened for hearing before hospital discharge.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	54	68	97	98	99
Annual Indicator	54.8	68.6	97.2	98.1	98.8
Numerator	57,933	74,869	105,798	108,690	108,968
Denominator	105,720	109,166	108,798	110,843	110,284
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	99	99	99	99	99
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 13

Percent of children without health insurance.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	9	12	11	10.5	10
Annual Indicator	9.4	11.5	10.1	11.5	
Numerator	234,728	226,990	227,609	264,614	
Denominator	2,505,910	1,974,833	2,253,217	2,291,296	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	9.5	9	8.5	8	8
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 14

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	96	96	97	97	97.5
Annual Indicator	NaN	96.3	97.4	96.8	97.5
Numerator	0	164,016	184,830	182,592	181,724
Denominator	0	170,257	189,740	188,557	186,477
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	97.5	98	98	98	98.5
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 15

The percent of very low birth weight infants among all live births.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	1.6	1.5	1.5	1.5	1.6
Annual Indicator	1.6	1.6	1.5	1.6	1.5
Numerator	1,769	1,787	1,735	1,776	1,713
Denominator	112,588	111,772	114,559	112,350	112,051
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	1.5	1.4	1.4	1.4	1.3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 16

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	4	3.7	3.6	3.5	3.5
Annual Indicator	5.5	3.5	2.8	3.1	3.1
Numerator	28	18	16	17	17
Denominator	510,821	519,337	562,263	542,420	542,420
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	3	2.9	2.8	2.7	2.6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 17

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	87	87	87	88	88
Annual Indicator	87.2	87.1	87.9	84.5	83.8
Numerator	1,507	1,556	1,498	1,501	1,435
Denominator	1,729	1,786	1,704	1,776	1,713
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	85	85	86	87	87
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 18

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	78	78.5	78.5	79	79
Annual Indicator	80.4	75.8	78.9	79.2	78.6
Numerator	85,824	84,726	87,874	89,022	88,086
Denominator	106,787	111,772	111,338	112,350	112,051
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	79	79	79.2	79.2	79.4
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 1

The percentage of Black non-Hispanic preterm infants in New Jersey

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	13.7	135	13.4	13.3	13.2
Annual Indicator	13.3	13.3	13.5	13.4	11.6
Numerator	2,420	2,356	2,339	2,256	1,912
Denominator	18,183	17,737	17,310	16,872	16,447
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	13.2	13.1	13	13	
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

STATE PERFORMANCE MEASURE # 3

The percentage of Regional MCH Consortia implementing community-based Fetal and Infant Mortality Review (FIMR) Teams.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective		100	100	100	100
Annual Indicator	100.0	100.0	100.0	100.0	100.0
Numerator	7	7	7	7	6
Denominator	7	7	7	7	6
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

STATE PERFORMANCE MEASURE # 4

The percentage of children with elevated blood lead levels (≥ 20 ug/dL).

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	1	0.6	0.5	0.4	0.4
Annual Indicator	1.0	0.6	0.5	0.5	0.3
Numerator	1,309	947	934	832	543
Denominator	137,536	149,233	171,712	172,932	167,018
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	0.3	0.3	0.2	0.2	0.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 5

The percentage of repeat pregnancies among adolescents 15 - 19 years of age.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	7	6.6	6.4	6.3	6
Annual Indicator	7.0	6.3	6.5	5.8	5.8
Numerator	559	484	477	406	404
Denominator	8,012	7,724	7,334	7,032	6,917
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	5.8	5.7	5.6	5.5	5.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 6

The percentage implementation of activities from the state plan to improve the nutritional and physical fitness of children and adolescents.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	50	75	90	95	100
Annual Indicator			90.0	90.0	100.0
Numerator		75	90	90	100
Denominator			100	100	100
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 7

The percentage of children with birth defects who are appropriately reported to the New Jersey Birth Defects Registry.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	85	85	86	86	87
Annual Indicator	89.2	85.1	84.2	86.6	
Numerator	1,217	1,190	1,186	1,289	
Denominator	1,365	1,398	1,408	1,488	
Is the Data Provisional or Final?				Provisional	

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	87	88	88	89	90
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 8

The percentage of completed Birth Defects Study interviews.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	76	72	74		
Annual Indicator	76.5	72.2	72.4	72.4	
Numerator	453	460	398	398	
Denominator	592	637	550	550	
Is the Data Provisional or Final?				Provisional	

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 9

The percentage of HIV exposed newborns receiving appropriate antiviral treatment to reduce the perinatal transmission of HIV.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	70	71	71	72	73
Annual Indicator	77.8	71.7	68.1	62.0	66.2
Numerator	207	157	147	114	104
Denominator	266	219	216	184	157
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	74	75	76	77	77
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 10

The percentage of communities receiving Community Partnership for Healthy Adolescent grants who have developed an adolescent health plan for their communities.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	100	100	100	100	100
Annual Indicator	100.0	100.0	100.0	100.0	100.0
Numerator	10	10	9	8	8
Denominator	10	10	9	8	8
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 11

The percentage implementation of activities from the state pediatric asthma plan.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	25	50	75	80	85
Annual Indicator	50	50	75	75	
Numerator					
Denominator					
Is the Data Provisional or Final?				Provisional	

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	90	95	100	100	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

FORM NOTES FOR FORM 11

Source of PM #14 - a report titled, New Jersey DMAHS Managed Care Enrollment, by HMO from the Office of Statistical Analysis and Managed Care Reimbursement, NJ Department of Human Services. The report used for 2004 data is for the month of December 2004. Cumulative annual reports are not available. The data reported is from the NJ KidCare A-JC programs which should not include new SCHIP initiatives.

Data prior to 2001 is not available in the same format.

FIELD LEVEL NOTES

1. **Section Number:** Performance Measure #1
Field Name: PM01
Row Name:
Column Name:
Year: 2004
Field Note:
The number of initial newborn biochemical screenings as reported by the state's Inborn Errors of Metabolism laboratory. The number of live births occurring in New Jersey regardless of mother's state residency according to the Electronic Birth Certificate as of 4/15/2005. In previous years the number of initial screenings exceeds the number of newborns due to difficulties in removing duplicate screens for the same child, out of state births tested in NJ or older non-newborns being screened. The software prevents the input of a numerator exceeding a denominator.

All newborns with confirmed biochemical disorders receive appropriate follow-up as detailed on Form 6.
2. **Section Number:** Performance Measure #2
Field Name: PM02
Row Name:
Column Name:
Year: 2004
Field Note:
The data reported in 2003 and 2004 are pre-populated with the 2002 data from the State estimates from SLAITS.
3. **Section Number:** Performance Measure #3
Field Name: PM03
Row Name:
Column Name:
Year: 2004
Field Note:
The data reported in 2003 and 2004 are pre-populated with the 2002 data from the State estimates from SLAITS.
4. **Section Number:** Performance Measure #4
Field Name: PM04
Row Name:
Column Name:
Year: 2004
Field Note:
The data reported in 2003 and 2004 are pre-populated with the 2002 data from the State estimates from SLAITS.
5. **Section Number:** Performance Measure #5
Field Name: PM05
Row Name:
Column Name:
Year: 2004
Field Note:
The data reported in 2003 and 2004 are pre-populated with the 2002 data from the State estimates from SLAITS.
6. **Section Number:** Performance Measure #6
Field Name: PM06
Row Name:
Column Name:
Year: 2002
Field Note:
Because only one of the States (Maine) met the NCHS standards for reliability for PM 6, the 2002 indicator is the national average except for Maine which has its State value noted.
7. **Section Number:** Performance Measure #6
Field Name: PM06
Row Name:
Column Name:
Year: 2003
Field Note:
The 2002 indicator has been entered as an estimate for 2003.
8. **Section Number:** Performance Measure #6
Field Name: PM06
Row Name:
Column Name:
Year: 2004
Field Note:
The data reported in 2003 and 2004 are pre-populated with the 2002 data from the State estimates from SLAITS.
9. **Section Number:** Performance Measure #7
Field Name: PM07
Row Name:
Column Name:
Year: 2004
Field Note:
Data is from the National Immunization Survey at the CDC
<http://www.cdc.gov/nip/coverage/NIS/>
No numerators or denominators are available.

Provisional data available as of 5/23/2005 for 2004 from the Q3/2003-Q2/2004 National Immunization Survey
10. **Section Number:** Performance Measure #8
Field Name: PM08
Row Name:
Column Name:

Year: 2004

Field Note:

Source of 2000 to 2003 data is the Electronic Birth Certificate (EBC) which includes births in NJ to out-of-state residents and does not include births to NJ residents outside of NJ.

Provisional 2004 data is from a provisional EBC file as of 6/18/2005. Census estimate for females 15-17 is from the Population Division, U.S. Census Bureau, March 10, 2005.

11. Section Number: Performance Measure #9

Field Name: PM09

Row Name:

Column Name:

Year: 2002

Field Note:

No data is available for 2002.

12. Section Number: Performance Measure #9

Field Name: PM09

Row Name:

Column Name:

Year: 2003

Field Note:

2003 data based on the NJ Dental Sealant Survey 2003. A random sample of 35 schools participated. All third graders in the schools took home the single question survey instrument worded "Does your child have a sealant on a back tooth?"

13. Section Number: Performance Measure #9

Field Name: PM09

Row Name:

Column Name:

Year: 2004

Field Note:

2004 data is based on the NJ Dental Sealant Survey conducted during the 2004-2005 school year which gave a statewide estimate of 42% of third grade students with sealants.

14. Section Number: Performance Measure #10

Field Name: PM10

Row Name:

Column Name:

Year: 2003

Field Note:

Data source - CDC National Center for Injury Prevention and Control website www.cdc.gov/ncipc/wisqars/.

ICD-9 Codes: E810-E825, E958.5, E988.5

ICD-10 Codes: V30-V39 (.4-.9), V40-V49 (.4-.9), V50-V59 (.4-.9),

V60-V69 (.4-.9), V70-V79 (.4-.9), V81.1 V82.1,V83-V86 (.0-.3),

V20-V28 (.3-.9),V29 (.4-.9),V12-V14 (.3-.9),V19 (.4-.6),

V02-V04 (.1,.9),V09.2,V80 (.3-.5),V87(.0-.8),V89.2

15. Section Number: Performance Measure #10

Field Name: PM10

Row Name:

Column Name:

Year: 2004

Field Note:

No provisional data is available to estimate mortality rates for 2004.

A provisional 2004 death certificate file should be available in Fall 2005.

16. Section Number: Performance Measure #11

Field Name: PM11

Row Name:

Column Name:

Year: 2004

Field Note:

Source of data before 2001 is the Mothers Survey, Ross Products Division, Abbott Laboratories. The numerator is breastfeed babies at hospital discharge, not the number of EXCLUSIVELY breastfeed babies at hospital discharge. Methodology of the survey is available in the publication, Breastfeeding Continues to Increase Into the New Millennium in Pediatrics 2002: 110: 1103-1109.

2001 to 2003 data is from Electronic Birth Certificate files which includes births in NJ to out-of-state residents and does not include births to NJ residents outside of NJ. EBC rates are very close to Ross' Mothers Survey (for 2000, EBC 62.7 verse Ross 63.2). Numerator is newborns breastfed in 24 hours prior to hospital discharge. Denominator is newborns discharged home.

Provisional 2004 data is from the EBC.

17. Section Number: Performance Measure #12

Field Name: PM12

Row Name:

Column Name:

Year: 2004

Field Note:

Data for 2000 to 2003 from Newborn Hearing Screening Program based on the Electronic Birth Certificate.

Provisional 2004 data from the Newborn Hearing Screening Program based on the EBC (as of 5/2005) which includes births in NJ to out-of-state residents and does not include births to NJ residents outside of NJ.

18. Section Number: Performance Measure #13

Field Name: PM13

Row Name:

Column Name:

Year: 2004

Field Note:

Source: the Annual Social and Economic Supplement (ASEC) of the Current population Survey (CPS), which is conducted by the Bureau of the Census for the Bureau of Labor Statistics. The age group is children 0-18 years old.

<http://www.state.nj.us/health/chs/hic0003/hic0003.pdf#Tab2>

No data is available for 2004.

2004 Data should become available Spring 2006

19. **Section Number:** Performance Measure #14
Field Name: PM14
Row Name:
Column Name:
Year: 2004
Field Note:
Source of PM #14 - a report titled, New Jersey DMAHS Managed Care Enrollment, by HMO from the Office of Statistical Analysis and Managed Care Reimbursement, NJ Department of Human Services. The report used for 2004 data is for the month of December 2004. Cumulative annual reports are not available. The data reported is from the NJ KidCare A-JC programs which should not include new SCHIP initiatives.
- Data prior to 2001 is not available in the same format.
20. **Section Number:** Performance Measure #15
Field Name: PM15
Row Name:
Column Name:
Year: 2004
Field Note:
Source of provisional 2003 data is the Electronic Birth Certificate file which includes births in NJ to out-of-state residents and does not include births to NJ residents outside of NJ.
Source of provisional 2004 data is the EBC file as of 4/15/2004.
21. **Section Number:** Performance Measure #16
Field Name: PM16
Row Name:
Column Name:
Year: 2002
Field Note:
Data source - CDC National Center for Injury Prevention and Control website www.cdc.gov/ncipc/wisqars/.
ICD-9 Codes: E950-E959
ICD-10 Codes: X60-X84, Y87.0
22. **Section Number:** Performance Measure #16
Field Name: PM16
Row Name:
Column Name:
Year: 2003
Field Note:
Data source - Provisional single cause of death file for 2003 as of 6/2005.
ICD-9 Codes: E950-E959
ICD-10 Codes: X60-X84, Y87.0
23. **Section Number:** Performance Measure #16
Field Name: PM16
Row Name:
Column Name:
Year: 2004
Field Note:
No provisional data is available to estimate mortality rates for 2004.
A provisional death certificate file for 2004 should be available in Spring 2006.
Provisional single cause of death file for 2003 entered as estimate for 2004.
24. **Section Number:** Performance Measure #17
Field Name: PM17
Row Name:
Column Name:
Year: 2004
Field Note:
Facilities for high risk deliveries defined as Intermediate, Intensive and Regional Perinatal Centers.
Data for 2000 to 2003 data from Electronic Birth Certificates which includes births in NJ to out-of-state residents and does not include births to NJ residents outside of NJ.
Provisional 2004 data from EBC as of 4/15/2005.
25. **Section Number:** Performance Measure #18
Field Name: PM18
Row Name:
Column Name:
Year: 2004
Field Note:
Data for 2000 to 2003 data from Electronic Birth Certificates which includes births in NJ to out-of-state residents and does not include births to NJ residents outside of NJ.
Provisional 2004 data from EBC as of 4/15/2005.
26. **Section Number:** State Performance Measure #1
Field Name: SM1
Row Name:
Column Name:
Year: 2004
Field Note:
Source: Final Birth Certificate files from the Center for Health Statistics. Preterm defined as less than 37 weeks gestation by exam from the birth certificate.
- Source of provisional 2004 data is the Electronic Birth Certificate file as of 6/18/2005 which include births in NJ to out-of-state residents and does not include births to NJ residents outside of NJ.
27. **Section Number:** State Performance Measure #3
Field Name: SM3
Row Name:
Column Name:
Year: 2004
Field Note:
As of January 1, 2004 there are 6 MCH Consortia (denominator).
28. **Section Number:** State Performance Measure #4
Field Name: SM4
Row Name:
Column Name:
Year: 2004

Field Note:

Children (0-6) with elevated blood lead levels (≥ 20 ug/dL) reported to the New Jersey Childhood Lead Poisoning Prevention Surveillance System (CLPPSS) for calendar year 2004.

29. Section Number: State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2004**Field Note:**

Data from 2000 to 2003 from Electronic Birth Certificates which includes births in NJ to out-of-state residents and does not include births to NJ residents outside of NJ. Provisional 2004 data from the EBC as of 6/18/2005.

30. Section Number: State Performance Measure #6**Field Name:** SM6**Row Name:****Column Name:****Year:** 2004**Field Note:**

The Child and Adolescent Health Program in the Division of Family Health Services is the source of SPM #6. SPM #6 will be modified in the future.

31. Section Number: State Performance Measure #7**Field Name:** SM7**Row Name:****Column Name:****Year:** 2004**Field Note:**

No 2004 data is currently available. Hospital medical chart audits are currently on going for 2004 and will not be complete until December 2005.

32. Section Number: State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2003**Field Note:**

New Jersey will not be participating in the National Birth Defects Study for children born after September 30, 2002. State Performance Measure will be dropped for 2005. Data for 2002 entered into 2003 as required.

33. Section Number: State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2004**Field Note:**

New Jersey will not be participating in the National Birth Defects Study for children born after September 30, 2002. State Performance Measure will be dropped for 2005.

34. Section Number: State Performance Measure #9**Field Name:** SM9**Row Name:****Column Name:****Year:** 2002**Field Note:****35. Section Number:** State Performance Measure #9**Field Name:** SM9**Row Name:****Column Name:****Year:** 2004**Field Note:**

Numerator and denominator counts are provisional for 2004.

36. Section Number: State Performance Measure #10**Field Name:** SM10**Row Name:****Column Name:****Year:** 2004**Field Note:**

This State Performance Measure will be modified in the future.

37. Section Number: State Performance Measure #11**Field Name:** SM11**Row Name:****Column Name:****Year:** 2003**Field Note:**

A manual indicator has been reported rather than a numerator and denominator.

38. Section Number: State Performance Measure #11**Field Name:** SM11**Row Name:****Column Name:****Year:** 2004**Field Note:**

This performance measure is being inactivated for 2005.

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]
STATE: NJ

OUTCOME MEASURE # 01

The infant mortality rate per 1,000 live births.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	6.5	6.1	6	6	5.9
Annual Indicator	6.3	6.3	5.7	5.7	5.6
Numerator	723	732	651	662	632
Denominator	115,542	115,769	114,559	116,823	113,651
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	5.9	5.8	5.8	5.7	5.6
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

OUTCOME MEASURE # 02

The ratio of the black infant mortality rate to the white infant mortality rate.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	2.4	2.4	2.4	2.4	2.4
Annual Indicator	2.4	2.4	2.4	2.8	2.8
Numerator	13.7	14	14	11.6	11.6
Denominator	5.7	5.8	5.8	4.2	4.2
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	2.3	2.3	2.2	2.2	2.1
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

OUTCOME MEASURE # 03

The neonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	4.3	4.2	4.1	4	4
Annual Indicator	4.3	4.2	4.0	4.0	4.0
Numerator	500	492	462	454	454
Denominator	115,542	115,769	114,643	113,651	113,651
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	3.9	3.9	3.8	3.8	3.7
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 04

The postneonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	1.9	1.9	1.8	1.8	1.8
Annual Indicator	1.9	2.1	1.4	1.6	1.6
Numerator	224	243	166	178	178
Denominator	115,542	115,769	114,643	113,651	113,651
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	1.7	1.7	1.7	1.6	1.6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 05

The perinatal mortality rate per 1,000 live births plus fetal deaths.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	6.1	6.1	6	6	5.9
Annual Indicator	6.0	6.3	6.0	6.1	6.1
Numerator	693	729	686	698	698
Denominator	116,235	116,498	115,245	114,349	114,349
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	5.9	5.8	5.8	5.7	5.7
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 06

The child death rate per 100,000 children aged 1 through 14.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	16	15	14.5	14	13.5
Annual Indicator	15.3	14.7	16.1	15.1	15.1
Numerator	249	240	264	248	248
Denominator	1,631,204	1,637,263	1,639,436	1,638,207	1,638,207
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	13	12.5	12.5	12	12
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE OUTCOME MEASURE # 7

The Fetal Mortality Rate per 1,000 live births plus fetal deaths

Annual Objective and Performance Data

	2000	2001	2002	2003	2004
Annual Performance Objective	6.6	6.6	6.5	6.5	6.4
Annual Indicator					
Numerator	766		783	821	821
Denominator	116,308		116,574	115,425	115,425
Is the Data Provisional or Final?				Provisional	

Annual Objective and Performance Data

	2005	2006	2007	2008	2009
Annual Performance Objective	6.4	6.3	6.3	6.2	6.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

FORM NOTES FOR FORM 12

None

FIELD LEVEL NOTES

1. **Section Number:** Outcome Measure 1
Field Name: OM01
Row Name:
Column Name:
Year: 2002
Field Note:
Source: Infant mortality data from the NJ Center for Health Statistics website <http://www.state.nj.us/health/chs/>
Numerator for infant deaths is the number of resident deaths less than 365 days old during the calendar year from the matched infant death certificate / birth certificate file.
Demoninator is the number of resident live births for calendar year.
2. **Section Number:** Outcome Measure 1
Field Name: OM01
Row Name:
Column Name:
Year: 2003
Field Note:
Source: Infant mortality data from the NJ Center for Health Statistics website <http://www.state.nj.us/health/chs/>
Numerator for infant deaths is the number of resident deaths less than 365 days old during the calendar year from the matched infant death certificate / birth certificate file.
Demoninator is the number of resident live births for calendar year.
No provisional data for 2004 is available as of 6/16/2005.

See Chart #7 Infant Mortality Rates by Race/Ethnicity attached to Section I.D. Table of Contents.
3. **Section Number:** Outcome Measure 1
Field Name: OM01
Row Name:
Column Name:
Year: 2004
Field Note:
No data for 2004 is available as of 8/23/2005. Provisional data from 2003 is entered into 2004 as a required estimate. Provisional 2004 data may not be available until Fall 2006.
4. **Section Number:** Outcome Measure 2
Field Name: OM02
Row Name:
Column Name:
Year: 2002
Field Note:
Source: Infant mortality data from the NJ Center for Health Statistics website <http://www.state.nj.us/health/chs/>
Numerator is the resident black non-Hispanic infant mortality rate.
Demoninator is the the resident white non-Hispanic infant mortality rate.
5. **Section Number:** Outcome Measure 2
Field Name: OM02
Row Name:
Column Name:
Year: 2003
Field Note:
Data for 2003 is provisional and is based on the provisional unlinked single cause of death file as of 4/2005.
Numerator is the resident black infant mortality rate (regardless of hispanic origin).
Demoninator is the the resident white infant mortality rate (regardless of hispanic origin).
6. **Section Number:** Outcome Measure 2
Field Name: OM02
Row Name:
Column Name:
Year: 2004
Field Note:
No provisional data for 2004 is available as of 6/16/2005. Provisional data may be available Fall 2006. Provisional data for 2003 is entered in 2004 as a required estimate.
7. **Section Number:** Outcome Measure 3
Field Name: OM03
Row Name:
Column Name:
Year: 2002
Field Note:
Source: Infant mortality data from the NJ Center for Health Statistics website <http://www.state.nj.us/health/chs/>
8. **Section Number:** Outcome Measure 3
Field Name: OM03
Row Name:
Column Name:
Year: 2003
Field Note:
For provisional 2003 data the numerator for neonatal infant deaths is the number of resident deaths less than 28 days old during the calendar year from the unlinked single cause of death file.
Demoninator is the number of resident live births for calendar year.
9. **Section Number:** Outcome Measure 3
Field Name: OM03
Row Name:
Column Name:
Year: 2004
Field Note:
No data for 2004 is available as of 6/16/2005. Provisional data from 2003 is entered into 2004 as a required estimate. Provisional 2004 data may not be available until Fall 2006.
10. **Section Number:** Outcome Measure 4
Field Name: OM04
Row Name:

Column Name:**Year:** 2002**Field Note:**Source: Infant mortality data from the NJ Center for Health Statistics website <http://www.state.nj.us/health/chs/>

Numerator for postneonatal infant deaths is the number of resident deaths 28-364 days old during the calendar year from the unlinked multiple cause of death file. Denominator is the number of resident live births for calendar year.

11. Section Number: Outcome Measure 4**Field Name:** OM04**Row Name:****Column Name:****Year:** 2003**Field Note:**

For provisional 2003 data the numerator for postneonatal infant deaths is the number of resident deaths 28-364 days old during the calendar year from the unlinked multiple cause of death file. Denominator is the number of resident live births for calendar year.

12. Section Number: Outcome Measure 4**Field Name:** OM04**Row Name:****Column Name:****Year:** 2004**Field Note:**

No data for 2004 is available as of 6/16/2005. Provisional data from 2003 is entered into 2004 as a required estimate. Provisional 2004 data may not be available until Fall 2006.

13. Section Number: Outcome Measure 5**Field Name:** OM05**Row Name:****Column Name:****Year:** 2003**Field Note:**

Source: Matched birth certificate infant death certificate files and fetal death certificate files for New Jersey residents from the NJDHSS Center for Health Statistics as analysed by the MCH Epidemiology Program.

Numerator: Number of fetal deaths > 28 weeks gestation plus infant deaths occurring less than 8 days (0-7 days).

14. Section Number: Outcome Measure 5**Field Name:** OM05**Row Name:****Column Name:****Year:** 2004**Field Note:**

No data for 2004 is available as of 6/16/2005. Provisional data from 2003 is entered into 2004 as a required estimate. Provisional 2004 data may not be available until Fall 2006.

15. Section Number: Outcome Measure 6**Field Name:** OM06**Row Name:****Column Name:****Year:** 2002**Field Note:**Source: NJ Center for Health Statistics website at <http://www.state.nj.us/health/chs/>**16. Section Number:** Outcome Measure 6**Field Name:** OM06**Row Name:****Column Name:****Year:** 2003**Field Note:**

Provisional 2003 data is from a provisional single cause of death file as of 6/18/2005.

17. Section Number: Outcome Measure 6**Field Name:** OM06**Row Name:****Column Name:****Year:** 2004**Field Note:**

No data for 2004 is available as of 6/16/2005. Provisional data from 2003 is entered into 2004 as a required estimate. Provisional 2004 data may not be available until Fall 2006.

FORM 13
CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS
STATE: NJ

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

3

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

2

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

3

4. Family members are involved in service training of CSHCN staff and providers.

2

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

3

6. Family members of diverse cultures are involved in all of the above activities.

3

Total Score: 16

Rating Key

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

FORM NOTES FOR FORM 13

None

FIELD LEVEL NOTES

None

FORM 14
LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE: NJ FY: 2006

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. Reduction of Adolescent Risk Taking Behaviors
2. Reducing Black Infant Mortality
3. Reducing Teen Pregnancy
4. Increasing Healthy Births
5. Improving Nutrition and Physical Fitness
6. Decreasing Asthma Hospitalizations in Children
7. Improving & Integrating Information Systems
8. Improve Access to Quality of Care for CSHCN
- 9.
- 10.

FORM NOTES FOR FORM 14

None

FIELD LEVEL NOTES

None

FORM 15
TECHNICAL ASSISTANCE(TA) REQUEST

STATE: NJ

APPLICATION YEAR: 2006

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	General Systems Capacity Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> N/A </u>	Assistance in developing topic specific briefs reporting on data and issues related to the PRAMS Survey and the MCH Block Grant Performance Measures.	Involving outside experts, health care providers and professional medical writers in developing topic specific reports will improve the capacity of the State to address prioritized MCH needs.	unknown
2.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
3.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the			

	measure number here: _____			
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

FORM NOTES FOR FORM 15

None

FIELD LEVEL NOTES

None

FORM 16
STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: NJ

SP # 1

PERFORMANCE MEASURE:

The percentage of Black non-Hispanic preterm infants in New Jersey

STATUS:

Active

GOAL

Decrease the rate of Black non-Hispanic preterm births.

DEFINITION

A preterm birth is defined as any newborn whose birth occurs through the end of the last day of the 37th week (259th day) following the onset of the last menstrual period.

Numerator:

Number of Black non-Hispanic preterm births (less than 259 days from the onset of the last menstrual period) in New Jersey.

Denominator:

Number of Black non-Hispanic live births in New Jersey.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Vital statistics collects the date of the last menstrual period and gestational age routinely on the electronic birth certificate.

SIGNIFICANCE

Preterm births are a primary determinant of Black infant mortality. Infant who are born preterm are at the highest risk for infant mortality and morbidity.

SP # 3

PERFORMANCE MEASURE:

The percentage of Regional MCH Consortia implementing community-based Fetal and Infant Mortality Review (FIMR) Teams.

STATUS:

Active

GOAL

To enhance the health and well-being of women, infants, and their families in New Jersey by improving the community resources and services delivery systems available to them.

DEFINITION

Fetal and Infant Mortality Reviews will be established in select communities in New Jersey through the Maternal and Child Health Consortia. This system of reviews will be consistent with the guidelines published by the Maternal and Child Health Bureau as developed by the MCH Bureau/ACOG National Fetal and Infant Mortality Review Program. A tool to describe the results of the reviews is being developed.

Numerator:

The number of Maternal and Child Health Consortia in New Jersey with community-based Fetal and Infant Mortality Review (FIMR) Teams.

Denominator:

The total number of Maternal and Child Health Consortia (during 2003 there were 7 MCH Consortia, as of 1/2004 there are 6).

Units: 100 **Text:** 1

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

The number of Regional MCH Consortia implementing community-based Fetal and Infant Mortality Review (FIMR) Teams is reported by the Maternal Child and Community Health (MCCH) Service Unit in the NJDHSS. MCCH is developing a summary report of NJ FIMR projects.

SIGNIFICANCE

Increasing the understanding of the circumstances and factors associated with fetal and infant deaths advances the ability to assess needs, improve the social and health care delivery system, target resources, and develop policies for women, infants, and their families in specific locations.

SP # 4

PERFORMANCE MEASURE:

The percentage of children with elevated blood lead levels (≥ 20 ug/dL).

STATUS:

Active

GOAL

Decrease the percentage of children with elevated blood lead levels.

DEFINITION

The percentage of children with elevated blood lead levels (≥ 20 ug/dL).

Numerator:

The number of children with elevated blood lead levels (≥ 20 ug/dL).

Denominator:

The number of children reported tested for blood lead in New Jersey.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

New Jersey's Childhood Lead Data Reporting and Tracking System starting in FY 1999. Prior years data based on reports from local health departments participating in NJDHSS childhood lead poisoning surveillance system.

SIGNIFICANCE

Children with elevated blood lead levels are at increased risk for behavioral, physiological and learning problems.

SP # 5

PERFORMANCE MEASURE:

The percentage of repeat pregnancies among adolescents 15 - 19 years of age.

STATUS:

Active

GOAL

Reduce the number of repeat pregnancies/births among adolescents 15-19 years of age.

DEFINITION

Percentage of repeat pregnancies among adolescents 15 - 19 years of age.

Numerator:

Number of repeat pregnancies/births to adolescents 15-19 years of age.

Denominator:

Number of pregnancies/births to adolescents 15-19 years of age.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Electronic Birth Certificate which reports previous pregnancies, adolescent parenting program data set.

SIGNIFICANCE

Teen parenting is associated with low academic achievement, poverty, and single parenthood, teen parents are also more likely to have another child within 2 years often leading to increased hardship and economic dependency.

SP # 6

PERFORMANCE MEASURE:

The percentage implementation of activities from the state plan to improve the nutritional and physical fitness of children and adolescents.

STATUS:

Active

GOAL

Improve the nutritional status and physical fitness of children and adolescents through the development of a strategic plan facilitating the integration of nutritional services into all aspects of child and adolescent health activities.

DEFINITION

The percentage implementation of activities from the state plan to improve the nutritional and physical fitness of children and adolescents.

Numerator:

Activities of the state strategic plan that has been implemented.

Denominator:

Total activities in the state strategic plan for nutrition and physical fitness for children and adolescents.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

The Child and Adolescent Health Program in the Division of Family Health Services of the NJDHSS will report the total number of activities in the state strategic plan and will report annually the number of activities implemented from the state strategic plan.

SIGNIFICANCE

Healthy eating patterns in childhood and adolescence promote optimal health, growth, and intellectual development. About 50% of adult body weight and 15% of adult body height and 45% of adult skeletal mass are gained through adolescence. There are strong links between diet and physical activity and the prevention of heart disease, stroke, certain types of cancer and osteoporosis.

SP # 7

PERFORMANCE MEASURE:

The percentage of children with birth defects who are appropriately reported to the New Jersey Birth Defects Registry.

STATUS:

Active

GOAL

To improve the compliance with mandated reporting of children with birth defects to the Special Child Health Services (SCHS) Registry.

DEFINITION

The percentage of children with birth defects who are appropriately reported to the New Jersey Birth Defects Registry.

Numerator:

The number of children with birth defects reported to the SCHS Registry.

Denominator:

The total number of children with birth defects, reported by existing agencies/professions and those identified through an audit of maternity and pediatric facilities.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Annual audits are conducted at all maternity hospitals and facilities with pediatric beds. Through the audit, it is possible to determine the number of children born during a specified time period who were reported appropriately by the facility, as well as the number of children who were missed.

SIGNIFICANCE

Birth defects affect 3-4% of newborns. Accurate information on their occurrence affects surveillance, service delivery, needs assessments, planning efforts, as well as other public health functions.

SP # 8

PERFORMANCE MEASURE:

The percentage of completed Birth Defects Study interviews.

STATUS:

Active

GOAL

To improve information regarding potential risk factors associated with birth defects through the completion of the Birth Defects Study in collaboration with the CDC. To participate in a cooperative network with the CDC and other states interested in examining potential risk factors associated with selected birth defects.

DEFINITION

The percentage of completed birth defects study interviews. Study 300 cases (mothers of infants with selected birth defects) and 100 controls (mothers of unaffected newborns) per year using a common questionnaire.

Numerator:

The number of case and control interviews completed in a year.

Denominator:

The total number of potential interviews per year.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Reported by Special Child Adult and Early Intervention Services (SCAEIS) in the Division of Family Health Services in NJDHSS. The Birth Defects Study interview has been developed by the CDC.

SIGNIFICANCE

The cause of 40-60% of birth defects is unknown. Participation in this national study will yield detailed information on potential risk factors for selected defects. Eight centers will be completing interviews which can be pooled for detailed analysis. It is hoped that information from this survey will aid in the development and implementation of appropriate prevention activities.

SP # 9

PERFORMANCE MEASURE:

The percentage of HIV exposed newborns receiving appropriate antiviral treatment to reduce the perinatal transmission of HIV.

STATUS:

Active

GOAL

To reduce the perinatal transmission of HIV infection for newborns in New Jersey. To improve the use of antiviral treatment to reduce the perinatal transmission of HIV.

DEFINITION

The percentage of HIV exposed newborns receiving appropriate antiviral treatment to reduce the perinatal transmission of HIV.

Numerator:

The number of HIV exposed newborns born in a given year who are reported to have received appropriate prenatal, perinatal, and/or neonatal antiviral treatment.

Denominator:

The number of HIV exposed newborns born in a given year.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Annual newborn HIV seroprevalence, pediatric surveillance, and mother-child linkage studies conducted by the New Jersey Division of AIDS Prevention and Control.

SIGNIFICANCE

Early identification and AZT treatment of pregnant women identified as HIV infected has proven to significantly reduce perinatal transmission among their infants. Since the HIV virus causes a devastating illness resulting in death, any public health effort which could prevent infection should be aggressively implemented.

SP # 10

PERFORMANCE MEASURE:

The percentage of communities receiving Community Partnership for Healthy Adolescent grants who have developed an adolescent health plan for their communities.

STATUS:

Active

GOAL

To reduce risk taking behavior among adolescents which may lead to reduction of intentional and unintentional injury, drug use, tobacco use, pregnancy, STDs etc.

DEFINITION

The percentage of communities receiving Community Partnership for Healthy Adolescent grants who have developed an adolescent health plan for their communities.

Numerator:

The number of Community Partnership for Healthy Adolescent grantees who have a completed adolescent health plan for their community.

Denominator:

The number of communities receiving Community Partnership for Healthy Adolescent grants.

Units: 100 **Text:** 1

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

There are currently 8 Community Partnership for Healthy Adolescents grantees, selected through a competitive Request for Applications (RFA) process. In order to be eligible for funding under the RFA, each grantee was required to have a completed Adolescent Health Plan for its community which complied with the format and specifications included in the RFA. Grantees report on progress towards meeting the objectives of their plan on a quarterly basis. Grantees are also required to do an annual review and revision of their plans. The plans are submitted to the Child and Adolescent Health Program and are reviewed. Plan approval is required for continued funding.

SIGNIFICANCE

Risk reduction activities designed to assist adolescents cannot be implemented in isolation at the state or local level. The responsibility to educate about and prevent risk taking behavior to reduce the consequences of such behavior must be shared by all youth serving organizations including but not limited to educational, social, recreational and health entities.

SP # 11

PERFORMANCE MEASURE:

The percentage implementation of activities from the state pediatric asthma plan.

STATUS:

Active

GOAL

To improve the health of children with asthma and to reduce the morbidity of pediatric asthma, particularly hospitalizations.

DEFINITION

A measure to monitor the implementation of a strategic plan for addressing pediatric asthma endorsed by representatives of public and private organizations engaged in asthma activities. The Pediatric Asthma Coalition of New Jersey and the Interdepartmental Asthma Committee will complete strategic plans.

Numerator:

The number of activities implementation from the pediatric strategic plan.

Denominator:

The total number of activities in the pediatric strategic plan.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

The Child and Adolescent Health Program in the Division of Family Health Services of the NJDHSS will report the number of activities implemented from the pediatric state plan. The American Lung Association of New Jersey reports to the Child and Adolescent Health Program on behalf of the Pediatric /Adult Asthma Coalition of New Jersey.

SIGNIFICANCE

Asthma is the most common chronic disease in children. The asthma hospitalization rate in children under five years of age is more than twice the rate for any other age group.

SO # <u>7</u>	
OUTCOME MEASURE:	The Fetal Mortality Rate per 1,000 live births plus fetal deaths
STATUS:	Active
GOAL	To reduce the number of fetal deaths.
DEFINITION	<p>fetal mortality ratio</p> <p>Numerator: Number of fetal deaths (20 or more weeks of gestation).</p> <p>Denominator: Number of live births plus fetal deaths (20 or more weeks of gestation).</p> <p>Units: Text:</p>
HEALTHY PEOPLE 2010 OBJECTIVE	
DATA SOURCES AND DATA ISSUES	Vital records collected by the State.
SIGNIFICANCE	Fetal mortality is a reflection of the health of the fetus and reflects the health status and treatment of the pregnant mother.

FORM NOTES FOR FORM 16

None

FIELD LEVEL NOTES

None

FORM 17
HEALTH SYSTEMS CAPACITY INDICATORS
FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA
STATE: NJ

HEALTH SYSTEMS CAPACITY MEASURE # 01

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	49.3	62.7	54.0	53.5	
Numerator	2,780	3,407	2,916	2,865	
Denominator	563,785	543,540	540,077	535,561	
Is the Data Provisional or Final?				Provisional	

HEALTH SYSTEMS CAPACITY MEASURE # 02

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	74.7	79.9	87.0	87.6	94.7
Numerator	27,727	24,047	28,313	29,639	35,668
Denominator	37,107	30,097	32,542	33,845	37,646
Is the Data Provisional or Final?				Final	Provisional

HEALTH SYSTEMS CAPACITY MEASURE # 03

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	61	NaN	NaN	NaN	
Numerator		0	0	0	
Denominator		0	0	0	
Is the Data Provisional or Final?				Provisional	

HEALTH SYSTEMS CAPACITY MEASURE # 04

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	66.9	67.6	66.1	64.5	66.5
Numerator	69,110	69,270	71,676	69,617	69,727
Denominator	103,241	102,512	108,500	107,927	104,832
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH SYSTEMS CAPACITY MEASURE # 07

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	22.5	24.5	27.2	33.3	33.9
Numerator	24,363	25,446	29,448	29,393	31,823
Denominator	108,267	103,745	108,144	88,358	93,858
Is the Data Provisional or Final?				Final	Provisional

HEALTH SYSTEMS CAPACITY MEASURE # 08

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	NaN	NaN	78.0	73.3	62.5
Numerator	0	0	5,460	5,500	5,000
Denominator	0	0	7,000	7,500	8,000
Is the Data Provisional or Final?				Final	Provisional

FORM NOTES FOR FORM 17

None

FIELD LEVEL NOTES

1. **Section Number:** Health Systems Capacity Indicator #01
Field Name: HSC01
Row Name:
Column Name:
Year: 2003
Field Note:
Source: Provisional 2003 Hospital Discharge Records from the New Jersey DHSS Health Care Financing Systems.
Hospital discharge records count unique hospital stays for children not unique children hospitalized.
2. **Section Number:** Health Systems Capacity Indicator #01
Field Name: HSC01
Row Name:
Column Name:
Year: 2004
Field Note:
Hospital discharge files are unavailable at this time. The provisional files will be available in September 2005.
3. **Section Number:** Health Systems Capacity Indicator #02
Field Name: HSC02
Row Name:
Column Name:
Year: 2002
Field Note:
4. **Section Number:** Health Systems Capacity Indicator #02
Field Name: HSC02
Row Name:
Column Name:
Year: 2003
Field Note:
Source 2000 to 2003:
FORM CMS-416: ANNUAL EPSDT PARTICIPATION REPORT from the NJ Department of Human Services
5. **Section Number:** Health Systems Capacity Indicator #02
Field Name: HSC02
Row Name:
Column Name:
Year: 2004
Field Note:
FORM CMS-416: ANNUAL EPSDT PARTICIPATION REPORT from the NJ Department of Human Services dated final 3/30/2005.
6. **Section Number:** Health Systems Capacity Indicator #03
Field Name: HSC03
Row Name:
Column Name:
Year: 2004
Field Note:
Data for HSCI #3 is currently not available. The data has been requested from the Department of Human Services that administers the SCHIP program in NJ. The closest measure available is the percent of children 0-2 years with a well visit - weighted average = 61% from a 2000 EPSDT NJ FamilyCare Focused Study based on medical record review conducted by an external quality reviewer for the Division of Medical Assistance and Health Services.
7. **Section Number:** Health Systems Capacity Indicator #04
Field Name: HSC04
Row Name:
Column Name:
Year: 2003
Field Note:
HSCI #04 - 2000 to 2003 data is for percent of NEWBORNS (not mothers 15 - 44) born to women 15-44 whose observed to expected prenatal visits are \geq to 80% on the Kotelchuck Index from the EBC. Birth records with missing information necessary to calculate the Kotelchuck Index have been excluded from the denominator.
8. **Section Number:** Health Systems Capacity Indicator #04
Field Name: HSC04
Row Name:
Column Name:
Year: 2004
Field Note:
HSCI #04 - 2004 provisional data is for percent of NEWBORNS (not mothers 15 - 44) born to women 15-44 whose observed to expected prenatal visits are \geq to 80% on the Kotelchuck Index from the EBC. Birth records with missing information necessary to calculate the Kotelchuck Index have been excluded from the denominator
9. **Section Number:** Health Systems Capacity Indicator #07
Field Name: HSC07
Row Name:
Column Name:
Year: 2004
Field Note:
Source: Form HCFA-416: ANNUAL EPSDT PARTICIPATION REPORT from the NJ Department of Human Services
2004 report dated final 3/30/2005.
10. **Section Number:** Health Systems Capacity Indicator #08
Field Name: HSC08
Row Name:
Column Name:
Year: 2004
Field Note:
Estimated by SCAEIS from monthly SSI reports.
Data from 2000 and 2001 is not available.

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #05
(MEDICAID AND NON-MEDICAID COMPARISON)
STATE: NJ

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) Percent of low birth weight (< 2,500 grams)	2001	Matching data files	<u>9.8</u>	<u>7.3</u>	<u>7.9</u>
b) Infant deaths per 1,000 live births	2001	Matching data files	<u>8.6</u>	<u>5.4</u>	<u>6.4</u>
c) Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester	2001	Matching data files	<u>63.1</u>	<u>88.1</u>	<u>78.4</u>
d) Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])	2001	Matching data files	<u>52.6</u>	<u>67.8</u>	<u>60.1</u>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06 (MEDICAID ELIGIBILITY LEVEL)
STATE: NJ

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) Infants (0 to 1)	2004	<u>185</u>
b) Medicaid Children (Age range <u>1</u> to <u>18</u>) (Age range <u> </u> to <u> </u>) (Age range <u> </u> to <u> </u>)	2004	<u>185</u> <u> </u> <u> </u>
c) Pregnant Women	2004	<u>185</u>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06 (SCHIP ELIGIBILITY LEVEL)
STATE: NJ

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) Infants (0 to 1)	2004	<u>350</u>
b) Medicaid Children (Age range <u>1</u> to <u>18</u>) (Age range <u> </u> to <u> </u>) (Age range <u> </u> to <u> </u>)	2004	<u>350</u> <u> </u> <u> </u>
c) Pregnant Women	2004	<u>350</u>

FORM NOTES FOR FORM 18

Data is from a file created by the MCH Epidemiology Program by matching the Electronic Birth Certificate file to a Medicaid Enrollment file. Most recent year available is 2001. Calculated rates/percents may not match rates/percents from the official Birth Certificate files.

FIELD LEVEL NOTES

1. **Section Number:** Indicator 05
Field Name: CareFirstTrimester
Row Name: Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester
Column Name:
Year: 2006
Field Note:
Data is from a file created by the MCH Epidemiology Program by matching the Electronic Birth Certificate file to a Medicaid Enrollment file. Most recent year available is 2001. Calculated rates/percents may not match rates/percents from the official Birth Certificate files.
2. **Section Number:** Indicator 05
Field Name: AdequateCare
Row Name: Percent of pregnant women with adequate prenatal care
Column Name:
Year: 2006
Field Note:
Data is from a file created by the MCH Epidemiology Program by matching the Electronic Birth Certificate file to a Medicaid Enrollment file. Most recent year available is 2001. Calculated rates/percents may not match rates/percents from the official Birth Certificate files.

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: NJ

HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)
(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
ANNUAL DATA LINKAGES		
Annual linkage of infant birth and infant death certificates	3	Yes
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	2	Yes
Annual linkage of birth certificates and WIC eligibility files	3	Yes
Annual linkage of birth certificates and newborn screening files	3	Yes
REGISTRIES AND SURVEYS		
Hospital discharge survey for at least 90% of in-State discharges	3	Yes
Annual birth defects surveillance system	3	Yes
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

*Where:
1 = No, the MCH agency does not have this ability.
2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.
3 = Yes, the MCH agency always has this ability.

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: NJ

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	No
Other: New Jersey Youth Tobacco Survey	3	No

HEALTH SYSTEMS CAPACITY INDICATOR #09C (Data Capacity) Overweight/Obesity
(The Ability of the State to Determine the Percent of Children Who are Obese or Overweight)

Data Source	Does your state participate in this survey/data source? (Select 1 - 3)*	Does your MCH program have direct access to this electronic database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	No
Pediatric Nutrition Surveillance System (PedNSS)	3	No
WIC Program Data	3	No
Other: 		

*Where:
1 = No
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

Notes:
1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

FORM NOTES FOR FORM 19

None

FIELD LEVEL NOTES

1. **Section Number:** Indicator 09A
Field Name: BAW
Row Name: Annual linkage of birth certificates and WIC eligibility files
Column Name:
Year: 2006
Field Note:
The MCH Epidemiology Program is in the process of analyzing a dataset created by linking WIC files to the new Electronic Birth Certificate as an objective of the SSDI Grant.
2. **Section Number:** Indicator 09A
Field Name: BAN
Row Name: Annual linkage of birth certificates and newborn screening files
Column Name:
Year: 2006
Field Note:
The MCH Epidemiology Program has linked birth records and newborn screening files for 2004 births as of 7/1/2005.

The linkage of birth records and newborn screening files was last conducted by the MCH Epidemiology Program for 1997 and 1998 files.
3. **Section Number:** Indicator 09A
Field Name: Discharge
Row Name: Hospital discharge survey for at least 90% of in-State discharges
Column Name:
Year: 2006
Field Note:
Hospital Discharge records for all in-patient hospitalizations in New Jersey facilities are available to the MCH Epidemiology Program of MCH surveillance purposes.
4. **Section Number:** Indicator 09A
Field Name: RecentMother
Row Name: Survey of recent mothers at least every two years (like PRAMS)
Column Name:
Year: 2006
Field Note:
The NJ PRAMS Survey was initiated in October of 2002.
5. **Section Number:** Indicator 09B
Field Name: YRBSS_09B
Row Name: Youth Risk Behavior Survey (YRBS)
Column Name:
Year: 2006
Field Note:
The NJ YRBS is conducted under the supervision of the Department of Education. The 2003 YRBS did not achieve the target participation rates due to requirements of active parental consent. The 2005 YRBS data collection will be completed in 6/2005.
6. **Section Number:** Indicator 09A
Field Name: BAM
Row Name: Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files
Column Name:
Year: 2006
Field Note:
Recently available birth, linked infant death and Medicaid eligibility files for 2002 will be linked and utilized in 2005.

FORM 20
HEALTH STATUS INDICATORS #01-#05
MULTI-YEAR DATA
STATE: NJ

HEALTH STATUS INDICATOR MEASURE # 01A

The percent of live births weighing less than 2,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	7.5	7.8	7.8	7.9	7.9
Numerator	8,702	8,756	8,921	9,244	9,244
Denominator	115,542	111,772	114,642	116,823	116,823
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 01B

The percent of live singleton births weighing less than 2,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	5.8	5.7	5.7	5.8	5.9
Numerator	6,431	6,285	6,215	6,340	6,304
Denominator	110,522	109,513	108,909	109,885	107,042
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH STATUS INDICATOR MEASURE # 02A

The percent of live births weighing less than 1,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	1.6	1.6	1.5	1.6	1.5
Numerator	1,769	1,787	1,736	1,872	1,713
Denominator	112,588	111,772	114,642	116,823	112,051
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 02B

The percent of live singleton births weighing less than 1,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	1.2	1.2	1.1	1.1	1.1
Numerator	1,289	1,267	1,161	1,189	1,180
Denominator	110,522	109,513	108,909	109,885	107,042
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH STATUS INDICATOR MEASURE # 03A

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	4.0	5.7	5.2	4.4	4.4
Numerator	70	99	93	77	77
Denominator	1,734,603	1,739,257	1,775,523	1,738,140	1,738,140
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH STATUS INDICATOR MEASURE # 03B

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	1.4	2.0	1.6	2.0	2.0
Numerator	25	34	28	34	34
Denominator	1,734,603	1,739,257	1,775,523	1,738,140	1,738,140
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH STATUS INDICATOR MEASURE # 03C

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	16.6	18.5	15.2	16.3	16.3
Numerator	158	179	160	165	165
Denominator	954,046	968,713	1,052,775	1,009,446	1,009,446
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH STATUS INDICATOR MEASURE # 04A

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	387.9	403.7	388.8	396.7	396.7
Numerator	6,729	7,022	6,904	6,895	6,895
Denominator	1,734,603	1,739,257	1,775,523	1,738,140	1,738,140
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH STATUS INDICATOR MEASURE # 04B

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	34.3	39.8	28.8	33.3	34.2
Numerator	590	692	512	578	593
Denominator	1,718,080	1,739,257	1,775,523	1,738,140	1,733,435
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH STATUS INDICATOR MEASURE # 04C

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	163.8	193.6	167.4	158.6	188.7
Numerator	1,629	1,875	1,762	1,601	1,948
Denominator	994,675	968,713	1,052,775	1,009,446	1,032,251
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH STATUS INDICATOR MEASURE # 05A

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	17.8	22.0	20.7	20.7	20.7
Numerator	4,426	5,561	5,365	5,365	5,365
Denominator	248,990	253,074	258,651	258,651	258,651
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH STATUS INDICATOR MEASURE # 05B

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	4.0	6.8	5.6	5.6	5.6
Numerator	5,856	9,866	8,185	8,185	8,185
Denominator	1,474,351	1,461,454	1,449,190	1,449,190	1,449,190
Is the Data Provisional or Final?				Provisional	Provisional

FORM NOTES FOR FORM 20

HSI #05A and 05B (reported cases of chlamydia) may be seriously under-reported. Chlamydia is not believed to be reported as frequently to the State STD Surveillance Program as other mandatory reportable diseases, such as gonorrhea. The MCH Bureau should consider changing this Health Status Indicator for a more consistent reproducible measure of STDs across states.

FIELD LEVEL NOTES

1. **Section Number:** Health Status Indicator #01A
Field Name: HSI01A
Row Name:
Column Name:
Year: 2002
Field Note:
Source of 2002 data from NJ Center for Health Statistics
<http://njshad.doh.state.nj.us/birth.html>
2. **Section Number:** Health Status Indicator #01A
Field Name: HSI01A
Row Name:
Column Name:
Year: 2003
Field Note:
Source of 2003 data from NJ Center for Health Statistics
<http://njshad.doh.state.nj.us/birth.html>
3. **Section Number:** Health Status Indicator #01A
Field Name: HSI01A
Row Name:
Column Name:
Year: 2004
Field Note:
Source of provisional 2004 data is the provisional 2004 Electronic Birth Certificate file which includes births in NJ to out-of-state residents and does not include births to NJ residents outside of NJ.
4. **Section Number:** Health Status Indicator #01B
Field Name: HSI01B
Row Name:
Column Name:
Year: 2002
Field Note:
Source of provisional 2001 and 2002 data from Electronic Birth Certificates which includes births in NJ to out-of-state residents and does not include births to NJ residents outside of NJ.
5. **Section Number:** Health Status Indicator #01B
Field Name: HSI01B
Row Name:
Column Name:
Year: 2003
Field Note:
Source of provisional 2002 and 2003 data from Electronic Birth Certificates which includes births in NJ to out-of-state residents and does not include births to NJ residents outside of NJ.
6. **Section Number:** Health Status Indicator #01B
Field Name: HSI01B
Row Name:
Column Name:
Year: 2004
Field Note:
Source of provisional 2004 data is the provisional 2004 Electronic Birth Certificate file which includes births in NJ to out-of-state residents and does not include births to NJ residents outside of NJ.
7. **Section Number:** Health Status Indicator #02A
Field Name: HSI02A
Row Name:
Column Name:
Year: 2002
Field Note:
Source of 2002 data from NJ Center for Health Statistics
<http://njshad.doh.state.nj.us/birth.html>
8. **Section Number:** Health Status Indicator #02A
Field Name: HSI02A
Row Name:
Column Name:
Year: 2003
Field Note:
Source of 2003 data from NJ Center for Health Statistics
<http://njshad.doh.state.nj.us/birth.html>
- See Chart #6 Very Low Birthweight by Race attached to Section I.D. Table of Contents.
9. **Section Number:** Health Status Indicator #02A
Field Name: HSI02A
Row Name:
Column Name:
Year: 2004
Field Note:
Source of provisional 2004 data is the provisional 2004 Electronic Birth Certificate file which includes births in NJ to out-of-state residents and does not include births to NJ residents outside of NJ.
10. **Section Number:** Health Status Indicator #02B
Field Name: HSI02B
Row Name:
Column Name:
Year: 2002

Field Note:

Source of provisional 2001 and 2002 data from Electronic Birth Certificates which includes births in NJ to out-of-state residents and does not include births to NJ residents outside of NJ.

11. Section Number: Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2003**Field Note:**

Source of provisional 2002 and 2003 data from Electronic Birth Certificates which includes births in NJ to out-of-state residents and does not include births to NJ residents outside of NJ.

12. Section Number: Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2004**Field Note:**

Source of provisional 2004 data is the provisional 2004 Electronic Birth Certificate file which includes births in NJ to out-of-state residents and does not include births to NJ residents outside of NJ.

13. Section Number: Health Status Indicator #03A**Field Name:** HSI03A**Row Name:****Column Name:****Year:** 2002**Field Note:**

Data source - CDC National Center for Injury Prevention and Control website www.cdc.gov/ncipc/wisqars/

ICD-9 Codes: E800-E869, E880-E929

ICD-10 Codes: V01-X59, Y85-Y86

14. Section Number: Health Status Indicator #03A**Field Name:** HSI03A**Row Name:****Column Name:****Year:** 2003**Field Note:**

Provisional 2003 data from provisional single cause of death file.

ICD-9 Codes: E800-E869, E880-E929

ICD-10 Codes: V01-X59, Y85-Y86

15. Section Number: Health Status Indicator #03A**Field Name:** HSI03A**Row Name:****Column Name:****Year:** 2004**Field Note:**

No data for 2004 is available. Data entered for 2004 is provisional data for 2003. Provisional 2004 data may be available in Spring 2006.

16. Section Number: Health Status Indicator #03B**Field Name:** HSI03B**Row Name:****Column Name:****Year:** 2002**Field Note:**

Data source - CDC National Center for Injury Prevention and Control website www.cdc.gov/ncipc/wisqars/

17. Section Number: Health Status Indicator #03B**Field Name:** HSI03B**Row Name:****Column Name:****Year:** 2003**Field Note:**

Provisional 2002 data from provisional single cause of death file.

18. Section Number: Health Status Indicator #03B**Field Name:** HSI03B**Row Name:****Column Name:****Year:** 2004**Field Note:**

No data for 2004 is available. Provisional data from 2003 is entered into 2004. Provisional 2004 data may be available in Spring 2006.

19. Section Number: Health Status Indicator #03C**Field Name:** HSI03C**Row Name:****Column Name:****Year:** 2002**Field Note:**

Data source - CDC National Center for Injury Prevention and Control website www.cdc.gov/ncipc/wisqars/

20. Section Number: Health Status Indicator #03C**Field Name:** HSI03C**Row Name:****Column Name:****Year:** 2003**Field Note:**

Provisional 2003 data from provisional single cause of death file.

21. Section Number: Health Status Indicator #03C**Field Name:** HSI03C**Row Name:****Column Name:**

Year: 2004

Field Note:

No data is available for 2004. Provisional 2003 data is entered for 2004. Provisional 2004 data may be available in Spring 2006.

22. Section Number: Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2002

Field Note:

Non-fatal unintentional injuries identified by IDC-9 E-codes E80-E949 coded in NJ Hospital Discharge record (UB-92).

23. Section Number: Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2003

Field Note:

Non-fatal unintentional injuries identified by IDC-9 E-codes E80-E949 coded in NJ Hospital Discharge record (UB-92).

Data for 2003 is not currently (as of 6/08/2004) available.

24. Section Number: Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2004

Field Note:

No data is available for 2004. Provisional 2003 data is entered for 2004. Provisional 2004 data may be available in Spring 2006.

25. Section Number: Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2002

Field Note:

Non-fatal unintentional injuries due to MVA identified by IDC-9 E-codes E810-E825 coded in NJ Hospital Discharge record (UB-92).

26. Section Number: Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2003

Field Note:

Non-fatal unintentional injuries due to MVA identified by IDC-9 E-codes E810-E825 coded in NJ Hospital Discharge record (UB-92).

Data for 2003 and 2004 is provisional.

27. Section Number: Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2004

Field Note:

Non-fatal unintentional injuries due to MVA identified by IDC-9 E-codes E810-E825 coded in NJ Hospital Discharge record (UB-92).

Data for 2003 and 2004 is provisional.

28. Section Number: Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2002

Field Note:

Non-fatal unintentional injuries due to MVA identified by IDC-9 E-codes E810-E825 coded in NJ Hospital Discharge record (UB-92).

29. Section Number: Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2003

Field Note:

Non-fatal unintentional injuries due to MVA identified by IDC-9 E-codes E810-E825 coded in NJ Hospital Discharge record (UB-92).

Data for 2003 and 2004 is provisional.

30. Section Number: Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2004

Field Note:

Non-fatal unintentional injuries due to MVA identified by IDC-9 E-codes E810-E825 coded in NJ Hospital Discharge record (UB-92).

Data for 2003 and 2004 is provisional.

31. Section Number: Health Status Indicator #05A

Field Name: HSI05A

Row Name:

Column Name:

Year: 2002

Field Note:

Source: Sexually Transmitted Disease Program in the NJDHSS

32. Section Number: Health Status Indicator #05A

Field Name: HSI05A

Row Name:
Column Name:
Year: 2003
Field Note:
Source: Sexually Transmitted Disease Program in the NJDHSS
Data for 2002 entered as estimate for 2003
Data for 2003 is not currently (as of 7/11/2005) available.

33. Section Number: Health Status Indicator #05A

Field Name: HSI05A

Row Name:

Column Name:

Year: 2004

Field Note:

Source: Sexually Transmitted Disease Program in the NJDHSS
Data for 2002 entered as estimate for 2004
Data for 2004 is not currently (as of 7/11/2005) available.

34. Section Number: Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2002

Field Note:

Source: Sexually Transmitted Disease Program in the NJDHSS

35. Section Number: Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2003

Field Note:

Source: Sexually Transmitted Disease Program in the NJDHSS
Data for 2002 entered as estimate for 2003
Data for 2003 is not currently (as of 7/11/2005) available.

36. Section Number: Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2004

Field Note:

Source: Sexually Transmitted Disease Program in the NJDHSS
Data for 2002 entered as estimate for 2004
Data for 2004 is not currently (as of 7/11/2005) available.

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: NJ

HSI #06A - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Provisional

CATEGORY TOTAL POPULATION BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	114,052	80,576	21,499	172	8,492	45	3,268	0
Children 1 through 4	453,524	325,812	80,822	1,116	33,235	288	12,251	0
Children 5 through 9	588,416	430,075	101,078	2,078	41,356	521	13,308	0
Children 10 through 14	623,874	459,266	111,741	2,165	38,678	586	11,438	0
Children 15 through 19	573,100	425,194	101,022	1,979	34,905	540	9,460	0
Children 20 through 24	504,796	369,985	90,732	2,264	33,443	655	7,717	0
Children 0 through 24	2,857,762	2,090,908	506,894	9,774	190,109	2,635	57,442	0

HSI #06B - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	86,776	24,276	0
Children 1 through 4	362,303	91,221	0
Children 5 through 9	484,918	103,498	0
Children 10 through 14	521,579	102,295	0
Children 15 through 19	478,062	95,038	0
Children 20 through 24	399,057	105,739	0
Children 0 through 24	2,332,695	522,067	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: NJ

HSI #07A - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Provisional

CATEGORY TOTAL LIVE BIRTHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Women < 15	95	36	57		1			1
Women 15 through 17	2,205	1,231	850		22			102
Women 18 through 19	4,680	2,813	1,611		56			200
Women 20 through 34	80,616	56,289	13,402		7,888			3,037
Women 35 or older	24,199	18,671	2,890		2,028			610
Women of all ages	111,795	79,040	18,810	0	9,995	0	0	3,950

HSI #07B - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Women < 15	61	36	2
Women 15 through 17	1,140	1,069	7
Women 18 through 19	2,606	2,080	15
Women 20 through 34	60,302	20,387	155
Women 35 or older	20,659	3,555	43
Women of all ages	84,768	27,127	222

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: NJ

HSI #08A - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Provisional

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	655	382	255	0	11	7	0	0
Children 1 through 4	106	59	41	0	4	2	0	0
Children 5 through 9	75	54	18	0	2	1	0	0
Children 10 through 14	100	62	37	0	0	1	0	0
Children 15 through 19	264	188	67	0	9	0	0	0
Children 20 through 24	426	288	123	1	9	5	0	0
Children 0 through 24	1,626	1,033	541	1	35	16	0	0

HSI #08B - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	481	172	2
Children 1 through 4	88	17	1
Children 5 through 9	58	17	0
Children 10 through 14	83	16	1
Children 15 through 19	219	45	0
Children 20 through 24	338	86	2
Children 0 through 24	1,267	353	6

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: NJ

HSI #09A - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Provisional

CATEGORY Miscellaneous Data BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown	Specific Reporting Year
All children 0 through 19	2,352,966	1,720,923.0	416,162.0	7,510.0	156,666.0	1,980.0	49,725.0		2004
Percent in household headed by single parent	22.0							22.0	2004
Percent in TANF (Grant) families	100.0	38.4	60.8	0	0.8				2004
Number enrolled in Medicaid	482,171	259,920.0	147,218.0	1,492.0	9,842.0			63,699.0	2004
Number enrolled in SCHIP	127,716							127,716.0	2004
Number living in foster home care	11,442							11,442.0	2004
Number enrolled in food stamp program	112,000	46,000.0	61,000.0					5,000.0	2004
Number enrolled in WIC	176,654	112,352.0	50,170.0	177.0	5,653.0	177.0	0	8,125.0	2004
Rate (per 100,000) of juvenile crime arrests	2,939.9	2,300.3	6,946.2	901.0	436.4				2004
Percentage of high school drop-outs (grade 9 through 12)	1.9	1.1	3.5	5.3	0.7				2004

HSI #09B - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	Specific Reporting Year
All children 0 through 19	1,936,638.0	416,328.0		2004
Percent in household headed by single parent	22.0		22.0	2004
Percent in TANF (Grant) families	72.8	27.2		2004
Number enrolled in Medicaid	386,092.0	96,079.0		2004
Number enrolled in SCHIP			127,716.0	2004
Number living in foster home care			11,442.0	2004
Number enrolled in food stamp program		36,000.0	112,000.0	2004
Number enrolled in WIC	94,333.0	82,321.0	0	2004
Rate (per 100,000) of juvenile crime arrests	2,985.0	2,729.0	0	2004
Percentage of high school drop-outs (grade 9 through 12)	1.9	3.9	0	2004

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: NJ

HSI #10 - Demographics (Geographic Living Area) *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Provisional

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	2,881,682
Living in urban areas	0
Living in rural areas	0
Living in frontier areas	0
Total - all children 0 through 19	0

Note:

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: NJ

HSI #11 - Demographics (Poverty Levels) *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Total Population	8,579,550.0
Percent Below: 50% of poverty	4.2
100% of poverty	8.3
200% of poverty	23.1

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: NJ

HSI #12 - Demographics (Poverty Levels) *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	2,381,682.0
Percent Below: 50% of poverty	4.2
100% of poverty	10.4
200% of poverty	27.5

FORM NOTES FOR FORM 21

Source for HSI #06A - 2004 data based on 2003 Population Estimates from www.census.gov/pooperation/www/projections/
Source: US Bureau of the Census, Population Division, September 2004.

Source for HSI #07A - Total Live Births by Race and Hispanic Ethnicity - from provisional electronic birth certificate file as of 6/23/2005.

Source for HSI #08A - Total Deaths by Race - 2002 Multiple Cause of Death file. The race group Native Hawaiian or Other Pacific Islanders includes the NCHS race categories of Native Hawaiian and Other Asian/Pacific Islanders.

Source for HSI #12 - U.S. Census Bureau, Current Population Survey, 2003 Annual Social and Economic Supplement.
http://ferret.bls.census.gov/macro/032003/pov/new46_100125_03.htm

FIELD LEVEL NOTES

- 1. Section Number:** Indicator 09A
Field Name: HSIRace_Children
Row Name: All children 0 through 19
Column Name:
Year: 2006
Field Note:
Source: Data from 2003 Population Estimate used for 2004
Population by Single-Year of Age, Race, Sex and Hispanic Origin: State of New Jersey, July 1, 2003
Source: US Bureau of the Census, Population Division, September 2004.
- 2. Section Number:** Indicator 09A
Field Name: HSIRace_SingleParentPercent
Row Name: Percent in household headed by single parent
Column Name:
Year: 2006
Field Note:
Source of data used for 2004 Estimate
2004 All Kids Count Data Book
<http://www.aecf.org/cgi-bin/kc.cgi?action=profile&area=New+Jersey>
Percent of Families With Children Headed by a Single Parent is the percentage of all families with own children under age 18 living in the household, who are headed by a person—male or female—without a spouse present in the home. "Own children" include never-married persons under age 18 who are the sons or daughters of the householder (head of household). The householder's stepchildren and adopted children also are counted as "own children."
This measure is based on analysis of the 12-month Current Population Survey (CPS) file maintained by the U.S. Bureau of Labor Statistics. Questions regarding family type are collected for all family households each month. A yearly average was calculated based on responses for the 12 months in the calendar year. The figures shown here represent 3-year averages. For example, the figure for 2001 represents an average of data from 2000 through 2002.
- 3. Section Number:** Indicator 09A
Field Name: HSIRace_TANFPercent
Row Name: Percent in TANF (Grant) families
Column Name:
Year: 2006
Field Note:
Data from 2001 entered as estimate for 2004
<http://www.acf.dhhs.gov/programs/ofa/character/FY2001/1037.htm>
Hispanic origin not reported separately from race, therefore the report categories of HISPANIC (27.2%) were included in RACE category of White.
- 4. Section Number:** Indicator 09A
Field Name: HSIRace_MedicaidNo
Row Name: Number enrolled in Medicaid
Column Name:
Year: 2006
Field Note:
Source of 2002 data used for required 2004 estimate
Children <19 year old enrolled in Medicaid in 2002 reported 482,171 from
http://www.cms.hhs.gov/medicaid/msis/02_table12.pdf

Race/ethnicity percentage of all Medicaid beneficiaries from
http://www.cms.hhs.gov/medicaid/msis/02_table14.pdf
Race/ethnicity categories modified and applied to match requested race categories. Hispanics combined with white race.
- 5. Section Number:** Indicator 09A
Field Name: HSIRace_SCHIPNo
Row Name: Number enrolled in SCHIP
Column Name:
Year: 2006
Field Note:
Source: FY 2004 Number of Children ever Enrolled in SCHIP by Program Type <http://www.cms.hhs.gov/schip/enrollment/>
M-SCHIP 39,870 and S-CHIP 87,374
- 6. Section Number:** Indicator 09A
Field Name: HSIRace_FoodStampNo
Row Name: Number enrolled in food stamp program
Column Name:
Year: 2006
Field Note:
Source: Data for 2003 used as estimate for 2004
USDA Report - Characteristics of Food Stamp Households: Fiscal Year 2003
<http://www.fns.usda.gov/oane/MENU/Published/FSP/FILES/Participation/2003Characteristics.pdf>
Distribution for participating households by race/ethnicity used for distribution of 0-19 year olds.
- 7. Section Number:** Indicator 09A
Field Name: HSIRace_WICNo
Row Name: Number enrolled in WIC
Column Name:
Year: 2006
Field Note:
Source of 2003 data which is used for required 2004 estimate:
SPECIAL SUPPLEMENTAL NUTRITION PROGRAM FOR WOMEN, INFANTS AND CHILDREN (WIC) FFY 2006 STATE STRATEGIC PLAN available from
<http://www.state.nj.us/health/fhs/wicstateplan2006.pdf>
and 2003 Pregnancy Nutrition Surveillance Comparison of Racial and Ethnic Distribution by Contributor

http://www.cdc.gov/pednss/pnss_tables/pdf/national_table3.pdf

Race and Ethnicity (for 1/1 to 12/31/2003)

were reported as mutually exclusive categories - White Non-Hispanic 17%, Black Non-Hispanic 28.4%, Hispanic 46.6%, American Indian/Alaskan Native .1%, Asian/Pacific Islander 3.2% All other/unknown 4.7%.

Total participation for children 0 - 5 years for 2003 was 176,654.

8. Section Number: Indicator 09A

Field Name: HSIRace_JuvenileCrimeRate

Row Name: Rate (per 100,000) of juvenile crime arrests

Column Name:

Year: 2006

Field Note:

Source - 2003 data used as estimate for 2004

New Jersey Juvenile Crime Report

<http://www.njsp.org/info/ucr2003/index.html>

9. Section Number: Indicator 09A

Field Name: HSIRace_DropOutPercent

Row Name: Percentage of high school drop-outs (grade 9 through 12)

Column Name:

Year: 2006

Field Note:

Source - New Jersey Department of Education 2004 NCLB State Report Card - <http://education.state.nj.us/rc/nclb04/state04.pdf>

New Jersey is using the dropout rate as the NCLB-required secondary academic indicator for high schools to assist in determining adequate yearly progress for this year.

The formula to calculate the dropout rate is as follows:

Students in grades 9 through 12 who drop out from July through June each year / # of students enrolled by October enrollment report for grades 9 through 12

10. Section Number: Indicator 09B

Field Name: HSIEthnicity_Children

Row Name: All children 0 through 19

Column Name:

Year: 2006

Field Note:

Source: Data from 2003 Population Estimate used for 2004

Population by Single-Year of Age, Race, Sex and Hispanic Origin: State of New Jersey, July 1, 2003

Source: US Bureau of the Census, Population Division, September 2004.

11. Section Number: Indicator 09B

Field Name: HSIEthnicity_TANFPercent

Row Name: Percent in TANF (Grant) families

Column Name:

Year: 2006

Field Note:

Data from 2001 entered as estimate for 2004

<http://www.acf.dhhs.gov/programs/ofa/character/FY2001/1037.htm>

Hispanic origin not reported separately from race, therefore the report categories of HISPANIC were included in RACE category of White.

12. Section Number: Indicator 09B

Field Name: HSIEthnicity_MedicaidNo

Row Name: Number enrolled in Medicaid

Column Name:

Year: 2006

Field Note:

Source of 2002 data used for required 2004 estimate

Children <19 year old enrolled in Medicaid in 2002 reported 482,171 from

http://www.cms.hhs.gov/medicaid/msis/02_table12.pdf

Race/ethnicity percentage of all Medicaid beneficiaries from

http://www.cms.hhs.gov/medicaid/msis/02_table14.pdf

Race/ethnicity categories modified and applied to match requested race categories. Hispanics combined with white race.

13. Section Number: Indicator 09B

Field Name: HSIEthnicity_SCHIPNo

Row Name: Number enrolled in SCHIP

Column Name:

Year: 2006

Field Note:

Source: FY 2004 Number of Children ever Enrolled in SCHIP by Program Type <http://www.cms.hhs.gov/schip/enrollment/>

M-SCHIP 39,870 and S-CHIP 87,374

14. Section Number: Indicator 09B

Field Name: HSIEthnicity_FoodStampNo

Row Name: Number enrolled in food stamp program

Column Name:

Year: 2006

Field Note:

Source: Data for 2003 used as estimate for 2004

USDA Report - Characteristics of Food Stamp Households: Fiscal Year 2003

<http://www.fns.usda.gov/oane/MENU/Published/FSP/FILES/Participation/2003Characteristics.pdf>

Distribution for participating households by race/ethnicity used for distribution of 0-19 year olds.

15. Section Number: Indicator 09B

Field Name: HSIEthnicity_WICNo

Row Name: Number enrolled in WIC

Column Name:

Year: 2006

Field Note:

Source of 2003 data which is used for required 2004 estimate:

SPECIAL SUPPLEMENTAL NUTRITION PROGRAM FOR WOMEN, INFANTS AND CHILDREN (WIC) FFY 2006 STATE STRATEGIC PLAN available from

<http://www.state.nj.us/health/fhs/wicstateplan2006.pdf>

and 2003 Pregnancy Nutrition Surveillance Comparison of Racial and Ethnic Distribution by Contributor

http://www.cdc.gov/pednss/pnss_tables/pdf/national_table3.pdf

Race and Ethnicity (for 1/1 to 12/31/2003)

were reported as mutually exclusive categories - White Non-Hispanic 17%, Black Non-Hispanic 28.4%, Hispanic 46.6%, American Indian/Alaskan Native .1%, Asian/Pacific Islander 3.2% All other/unknown 4.7%.

Total participation for children 0 - 5 years for 2003 was 176,654.

16. **Section Number:** Indicator 10
Field Name: Metropolitan
Row Name: Living in metropolitan areas
Column Name:
Year: 2006
Field Note:
Source: Population Division, U.S. Census Bureau, March 10, 2005.
17. **Section Number:** Indicator 11
Field Name: S11_50percent
Row Name: Percent Below: 50% of poverty
Column Name:
Year: 2006
Field Note:
2000 data provided as estimate for 2004
Source: Census 2000 Summary File 3, US Census Bureau
<http://www.wnjin.net/OneStopCareerCenter/LaborMarketInformation/lmi10/pov/cntyratio.htm>
18. **Section Number:** Indicator 11
Field Name: S11_100percent
Row Name: 100% of poverty
Column Name:
Year: 2006
Field Note:
Poverty estimate from 2002 is the most recent available data.
Source: Small Area Income and Poverty Estimates Program, US Bureau of the Census, 12/04.
Prepared by: New Jersey State Data Center, New Jersey Department of Labor and Workforce Development, 1/05
<http://www.wnjin.net/OneStopCareerCenter/LaborMarketInformation/lmi10/est02US.xls>
19. **Section Number:** Indicator 11
Field Name: S11_200percent
Row Name: 200% of poverty
Column Name:
Year: 2006
Field Note:
Source: U.S. Census Bureau
Last revised: July 9, 2004
http://pubdb3.census.gov/macro/032004/pov/new46_185200_01.htm
20. **Section Number:** Indicator 12
Field Name: S12_50percent
Row Name: Percent Below: 50% of poverty
Column Name:
Year: 2006
Field Note:
2000 data provided as estimate for 2004 using all ages (not only 0 - 19)
Source: Census 2000 Summary File 3, US Census Bureau
<http://www.wnjin.net/OneStopCareerCenter/LaborMarketInformation/lmi10/pov/cntyratio.htm>
21. **Section Number:** Indicator 12
Field Name: S12_100percent
Row Name: 100% of poverty
Column Name:
Year: 2006
Field Note:
Poverty estimate from 2002 is the most recent available data.
Estimate is for children 18 and under.
Source: Small Area Income and Poverty Estimates Program, US Bureau of the Census, 12/04.
Prepared by: New Jersey State Data Center, New Jersey Department of Labor and Workforce Development, 1/05
<http://www.wnjin.net/OneStopCareerCenter/LaborMarketInformation/lmi10/est02US.xls>
22. **Section Number:** Indicator 12
Field Name: S12_200percent
Row Name: 200% of poverty
Column Name:
Year: 2006
Field Note:
Source: U.S. Census Bureau
Last revised: July 9, 2004
http://pubdb3.census.gov/macro/032004/pov/new46_185200_01.htm
for children under 18 years old
23. **Section Number:** Indicator 09A
Field Name: HSIRace_FosterCare
Row Name: Number living in foster home care
Column Name:
Year: 2006
Field Note:
Source for 2004 data estimated from 2002 data
Source: <http://www.acf.hhs.gov/programs/cb/dis/tables/entryexit2002.htm>
24. **Section Number:** Indicator 09B
Field Name: HSIethnicity_FosterCare
Row Name: Number living in foster home care
Column Name:
Year: 2006
Field Note:
Source for 2004 data estimated from 2002 data
Source: <http://www.acf.hhs.gov/programs/cb/dis/tables/entryexit2002.htm>

NEW STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: NJ

SP # 1

PERFORMANCE MEASURE:

The percentage of Black non-Hispanic preterm infants in New Jersey

GOAL

Decrease the rate of Black non-Hispanic preterm births.

DEFINITION

A preterm birth is defined as any newborn whose birth occurs through the end of the last day of the 37th week (259th day) following the onset of the last menstrual period.

Numerator:

Number of Black non-Hispanic preterm births (less than 259 days from the onset of the last menstrual period) in New Jersey.

Denominator:

Number of Black non-Hispanic live births in New Jersey.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Vital statistics collects the date of the last menstrual period and gestational age routinely on the electronic birth certificate.

SIGNIFICANCE

Preterm births are a primary determinant of Black infant mortality. Infant who are born preterm are at the highest risk for infant mortality and morbidity.

OBJECTIVE

2006	2007	2008	2009	2010
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SP # 2

PERFORMANCE MEASURE:

The percentage of Regional MCH Consortia implementing community-based Fetal and Infant Mortality Review (FIMR) Teams.

GOAL

To enhance the health and well-being of women, infants, and their families in New Jersey by improving the community resources and services delivery systems available to them.

DEFINITION

Fetal and Infant Mortality Reviews will be established in select communities in New Jersey through the Maternal and Child Health Consortia. This system of reviews will be consistent with the guidelines published by the Maternal and Child Health Bureau as developed by the MCH Bureau/ACOG National Fetal and Infant Mortality Review Program. A tool to describe the results of the reviews is being developed.

Numerator:

The number of Maternal and Child Health Consortia in New Jersey with community-based Fetal and Infant Mortality Review (FIMR) Teams.

Denominator:

The total number of Maternal and Child Health Consortia (during 2003 there were 7 MCH Consortia, as of 1/2004 there are 6).

Units: 100 **Text:** 1

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

The number of Regional MCH Consortia implementing community-based Fetal and Infant Mortality Review (FIMR) Teams is reported by the Maternal Child and Community Health (MCCH) Service Unit in the NJDHSS. MCCH is developing a summary report of NJ FIMR projects.

SIGNIFICANCE

Increasing the understanding of the circumstances and factors associated with fetal and infant deaths advances the ability to assess needs, improve the social and health care delivery system, target resources, and develop policies for women, infants, and their families in specific locations.

OBJECTIVE

2006	2007	2008	2009	2010
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SP # 3

PERFORMANCE MEASURE:

The percentage of children with elevated blood lead levels (≥ 20 ug/dL).

GOAL

Decrease the percentage of children with elevated blood lead levels.

DEFINITION

The percentage of children with elevated blood lead levels (≥ 20 ug/dL).

Numerator:

The number of children with elevated blood lead levels (≥ 20 ug/dL).

Denominator:

The number of children reported tested for blood lead in New Jersey.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

New Jersey's Childhood Lead Data Reporting and Tracking System starting in FY 1999. Prior years data based on reports from local health departments participating in NJDHSS childhood lead poisoning surveillance system.

SIGNIFICANCE

Children with elevated blood lead levels are at increased risk for behavioral, physiological and learning problems.

OBJECTIVE

2006	2007	2008	2009	2010
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SP # 4

PERFORMANCE MEASURE:

The percentage of repeat pregnancies among adolescents 15 - 19 years of age.

GOAL

Reduce the number of repeat pregnancies/births among adolescents 15-19 years of age.

DEFINITION

Percentage of repeat pregnancies among adolescents 15 - 19 years of age.

Numerator:

Number of repeat pregnancies/births to adolescents 15-19 years of age.

Denominator:

Number of pregnancies/births to adolescents 15-19 years of age.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Electronic Birth Certificate which reports previous pregnancies, adolescent parenting program data set.

SIGNIFICANCE

Teen parenting is associated with low academic achievement, poverty, and single parenthood, teen parents are also more likely to have another child within 2 years often leading to increased hardship and economic dependency.

OBJECTIVE

2006	2007	2008	2009	2010
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SP # 5

PERFORMANCE MEASURE:

Increase the number of State supported initiatives for improving the nutrition and physical activity of children and adolescents

GOAL

Improve the nutritional status and physical fitness of children and adolescents through the development of a strategic plan facilitating the integration of nutritional services into all aspects of child and adolescent health activities.

DEFINITION

The percentage implementation of activities from the state plan to improve the nutritional and physical fitness of children and adolescents.

Numerator:

Activities of the state strategic plan that has been implemented.

Denominator:

Total activities in the state strategic plan for nutrition and physical fitness for children and adolescents.

Units: **Text:** 0

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

The Child and Adolescent Health Program in the Division of Family Health Services of the NJDHSS will report the total number of activities in the state strategic plan and will report annually the number of activities implemented from the state strategic plan.

SIGNIFICANCE

Healthy eating patterns in childhood and adolescence promote optimal health, growth, and intellectual development. About 50% of adult body weight and 15% of adult body height and 45% of adult skeletal mass are gained through adolescence. There are strong links between diet and physical activity and the prevention of heart disease, stroke, certain types of cancer and osteoporosis.

OBJECTIVE

2006	2007	2008	2009	2010
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SP # 6

PERFORMANCE MEASURE:

The percentage of children with birth defects who are appropriately reported to the New Jersey Birth Defects Registry.

GOAL

To improve the compliance with mandated reporting of children with birth defects to the Special Child Health Services (SCHS) Registry.

DEFINITION

The percentage of children with birth defects who are appropriately reported to the New Jersey Birth Defects Registry.

Numerator:

The number of children with birth defects reported to the SCHS Registry.

Denominator:

The total number of children with birth defects, reported by existing agencies/professions and those identified through an audit of maternity and pediatric facilities.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Annual audits are conducted at all maternity hospitals and facilities with pediatric beds. Through the audit, it is possible to determine the number of children born during a specified time period who were reported appropriately by the facility, as well as the number of children who were missed.

SIGNIFICANCE

Birth defects affect 3-4% of newborns. Accurate information on their occurrence affects surveillance, service delivery, needs assessments, planning efforts, as well as other public health functions.

OBJECTIVE

2006	2007	2008	2009	2010
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SP # 7

PERFORMANCE MEASURE:

Percent of children reported to the NJ Birth Defects Registry by three months of age.

GOAL

To improve information regarding birth defects

DEFINITION

Percent of children reported to the NJ Birth Defects Registry by three months of age.

Numerator:

The number of children reported to the NJ Birth Defects Registry by three months of age.

Denominator:

The number of children reported to the NJ Birth Defects Registry.

Units: **Text:** 0

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Reported by Special Child Adult and Early Intervention Services (SCAEIS) in the Division of Family Health Services in NJDHSS.

SIGNIFICANCE

The cause of 40-60% of birth defects is unknown. Participation in this national study will yield detailed information on potential risk factors for selected defects. Eight centers will be completing interviews which can be pooled for detailed analysis. It is hoped that information from this survey will aid in the development and implementation of appropriate prevention activities.

OBJECTIVE

2006	2007	2008	2009	2010
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SP # 8

PERFORMANCE MEASURE:

The percentage of HIV exposed newborns receiving appropriate antiviral treatment to reduce the perinatal transmission of HIV.

GOAL

To reduce the perinatal transmission of HIV infection for newborns in New Jersey. To improve the use of antiviral treatment to reduce the perinatal transmission of HIV.

DEFINITION

The percentage of HIV exposed newborns receiving appropriate antiviral treatment to reduce the perinatal transmission of HIV.

Numerator:

The number of HIV exposed newborns born in a given year who are reported to have received appropriate prenatal, perinatal, and/or neonatal antiviral treatment.

Denominator:

The number of HIV exposed newborns born in a given year.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Annual newborn HIV seroprevalence, pediatric surveillance, and mother-child linkage studies conducted by the New Jersey Division of AIDS Prevention and Control.

SIGNIFICANCE

Early identification and AZT treatment of pregnant women identified as HIV infected has proven to significantly reduce perinatal transmission among their infants. Since the HIV virus causes a devastating illness resulting in death, any public health effort which could prevent infection should be aggressively implemented.

OBJECTIVE

2006	2007	2008	2009	2010
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